DOCUMENT RESUME

ED 408 042 PS 025 431

TITLE	Kids Count in Nebraska 1996 Report.
INSTITUTION	Voices for Children in Nebraska, Omaha.
SPONS AGENCY	Annie E. Casey Foundation, Baltimore, MD.
PUB DATE	Jan 97
NOTE	41p.
AVAILABLE FROM	Voices for Children in Nebraska, 7521 Main Street, Suite 103, Omaha, NE 68127; phone: 402-597-3100; fax: 402-597-2705 ($10 each).
PUB TYPE	Numerical/Quantitative Data (110) -- Reports - Descriptive (141)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	Adolescents; Birth Weight; Births to Single Women; Child Abuse; *Child Health; Child Neglect; *Children; Dropout Rate; Early Parenthood; Elementary Secondary Education; Infants; Mortality Rate; One Parent Family; Poverty; Prenatal Care; Preschool Education; *Social Indicators; *State Surveys; Statistical Surveys; Tables (Data); Trend Analysis; Violence; *Well Being
IDENTIFIERS	Arrests; Firearms; *Indicators; *Nebraska; Placement (Foster Care); Project Head Start; Vaccination

ABSTRACT

This Kids Count report examines statewide trends in the well-being of Nebraska's children. The statistical portrait is based on seven general areas of children's well-being: (1) early care and education; (2) physical and behavioral health; (3) child abuse, neglect, and domestic violence; (4) out of home care; (5) education; (6) economic well-being; and (7) juvenile justice. Indicator one focused on child care, education programs, and Head Start. Indicator two focused on prenatal care, low birthweight babies, birth defects, child deaths, infant mortality and substance abuse. Indicator three focused on substantiated cases of abuse and neglect, and domestic violence shelters. Indicator four focused on foster care homes, out of home care, and children in state custody. Indictor five focused on high school graduation, dropout, and special education. Indicator six studied single parent families, divorce, child support, school food programs, and housing costs. The final indicator focused on juvenile arrests, offenses, detention, and parole. Hopeful findings included a steady increase in the number of places funded for children enrolled in Head Start, increase in WIC food supplements, and an increase in eligible children receiving Medicaid. Of concern was the dramatic increase in number of children in foster care and juvenile arrests. (SD)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED 408 042

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

KIDS COUNT

PS 025431

In Nebraska

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

Kathy Bigsby Moore

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

BEST COPY AVAILABLE

kids count in Nebraska

1996 REPORT

...ication of
Voices for Children in Nebraska

STATE OF NEBRASKA

KIM M. ROBAK
Lieutenant Governor
State Capitol, Room 2115
P.O. Box 94863
Lincoln, Nebraska 68509-4863
Phone (402) 471-2256

E. Benjamin Nelson
Governor

January, 1997

Kids Count in Nebraska is committed to gathering the most current data on child well-being, presenting that data to you in a meaningful way, and encouraging continuation and expansion of data collection systems. We have presented at least 10 years of data wherever possible. You will also see county breakouts of data in several areas so that you can compare your community against other parts of the state.

There are many initiatives underway in Nebraska to improve services to children and families. The Family Preservation and Support Plan was developed using many risk factors previously identified in Kids Count Reports. Under this program, communities with some of the highest risk factors will have the opportunity to apply for funding to improve conditions for children and families.

Another initiative underway in Nebraska is the Nebraska Partnership for Health and Human Services. This effort will create a unified Health and Human Services system that works with communities to identify their needs and shape how services are managed for the challenges of today and tomorrow. Nebraskans can expect the new Health and Human Services system to provide better services, to be simpler and more efficient, to be based on common sense, to be accountable to Nebraskans, and to realize cost savings.

We hope you will examine Nebraska's strengths and weaknesses, utilizing the information in this report to help us make sure Kids Count in Nebraska.

Sincerely,

Kim M. Robak

Kim Robak, Lt. Governor,
State of Nebraska
Chairperson, Kids Count in Nebraska
Panel of Advisors

Kids Count is a national and state-by-state effort sponsored by the Annie E. Casey Foundation to track the status of children in the United States utilizing the best available data. Key indicators measure the education, social, economic and physical well-being of children.

Kids Count in Nebraska is a children's data and policy project of Voices for Children in Nebraska in collaboration with the Department of Family and Consumer Science, University of Nebraska at Lincoln, and numerous agencies in Nebraska which maintain important information about child well-being. The Kids Count Technical Team is comprised of data representatives from each of those agencies who not only provide us with information from their databases but advise us on the positioning of their data in relation to other fields of data as well. We could not produce this report without their interest and cooperation. Kids Count in Nebraska, sponsored by The Annie E. Casey Foundation, began in 1993. This is the project's fourth report.

*Additional copies of the **1996 Kids Count in Nebraska** report as well as 1993, 1994 and 1995 reports, are available for $10.00 each from:*

Voices for Children in Nebraska
7521 Main Street, Suite 103
Omaha, NE 68127
Phone: (402) 597-3100
FAX: (402) 597-2705

Portions of this report may be reproduced without prior permission, provided the source is cited as:
(Copyright) ***1996 Kids Count in Nebraska.***

Cover Photo: Debi, age 7

Credits:
Design: Diane Sloderbeck
Photography: Ron Roth
Names of some individuals have been changed when indicated by an *.

Author: **Carr Anderson Bentz, Ph.D.**
Dept. of Family and Consumer Science
College of Human Resources and Family Sciences
University of Nebraska-Lincoln
Lincoln, NE 68538-0801

BEST COPY AVAILABLE

Table of Contents

I. **OVERVIEW: OUR CHILDREN, OUR FUTURE** 2

II. **INDICATORS OF CHILD WELL-BEING**

EARLY CARE AND EDUCATION 4
- Need for Quality Child Care and Early Childhood Education Programs
- Early Childhood Initiatives
- Child Care
- Registered/Licensed Providers
- Child Care Subsidy
- Head Start

HEALTH: PHYSICAL AND BEHAVIORAL 7
- Births
- Prenatal Care
- Low Birth Weight and Birth Defects
- WIC
- Teen Birth Rates
- Immunizations
- Blood Lead Levels
- Medicaid
- Access to Health Care: Health Insurance
- Child Deaths
- Infant Mortality
- Mortality Among Children 1-19
- Alcohol, Tobacco and Other Drug Use
- Mental Health and Substance Abuse
- Community-Based Mental Health Organizations
- Residential Care

CHILD ABUSE AND NEGLECT/ DOMESTIC VIOLENCE 12
- Over 3,500 Nebraska Children
- Substantiated Cases
- Majority of Children Remain in the Home
- Neglect Most Common Type
- Not All Reports of Child Abuse are Investigated
- Domestic Violence Shelters

OUT OF HOME CARE 14
- Leaving Home: 10,249 Children in Out-of-Home Care in 1995
- Race and Ethnicity of Children in Out-of-Home Care
- 3,247 in NDSS Custody
- Average Number of Moves
- Licensed Foster Care Homes

EDUCATION 16
- High School Graduates and Completion Rate
- Secondary School Dropouts
- Number of Students Expelled
- Special Education

ECONOMIC WELL-BEING 18
- Earned Income Tax Credit (EITC)
- Single Parent Families
- Divorce and Child Support
- Aid to Families with Dependent Children (ADC)
- Food Stamps
- National School Lunch Program through USDA
- National School Breakfast Program through USDA
- Nebraska Summer Food Service Program
- Child Care Food Program through USDA
- Housing Costs

JUVENILE JUSTICE 22
- Juveniles Arrested
- Part I Offenses
- Part II Offenses
- Probation
- Detention After Arrest
- Committed to Youth Rehabilitation/ Treatment Centers
- Adult Jail
- Parole in 1995

III. **POLICY** 24

IV. **COUNTY DATA NOTES** 25

V. **COUNTY DATA** 26

VI. **METHODOLOGY, DATA SOURCES AND DEFINITIONS** 30

VII. **REFERENCES** 32

VIII. **KIDS COUNT TEAM AND ADVISORS** 33

Overview . . .

Our Mission . . .
Counting kids helps make sure KIDS COUNT.

This is the fourth annual Kids Count Report produced by Voices for Children through a four year grant from the Annie E. Casey Foundation. Funding from the Annie E. Casey Foundation and the Kiewit Foundation will allow us to continue producing an annual Kids Count Report for at least three more years.

Numbers and Faces

The report reviews available data in seven areas of child health and well-being. Presented with these statistics are the stories, words and faces representing some of our state's children and their families. It is our hope that the stories and faces breathe life into the numbers presented.

Two other components of this report: Impact Boxes and a Policy Page, help you better understand what effect the indicators have on children and families and on our state as a whole. Impact boxes are found in each section. A Policy Page identifies specific policy changes which may have an effect on certain indicator areas.

How many children are there in Nebraska?

In 1990, the U.S. Census of Population counted 429,012 children under the age of 18 in Nebraska. This was slightly more than one-quarter of the total population (27.2%) in the state. As you can see by referring to the county data pages at the end of this report, individual counties may have higher or lower proportions of children. When the 1990 Census was taken, a trend toward an aging population with proportionately fewer children continued from 1980. Also since 1980 the proportion of children who are of minority status (Black, Hispanic, American Indian/Eskimo/Aleut, Asian/Pacific Islander and children of other race) has grown. In 1990, approximately 10.4% of Nebraska children were minority, and that percentage is expected to increase.

How are those children doing?

- 58,474 children under 18 live in poverty, according to the U.S. Bureau of the Census. Only about 38% of poor children receive food stamps each month.

In 1995:

- 19,771 Nebraska youths graduated from high school.
  407 youth received their GED or other completion certificates.
- 4,207 youth enrolled in grades 7-12 dropped out of school in 1994-1995.
  283 students were expelled.
- 3,510 children were substantiated as abused or neglected.
  10,249 children were in out-of-home care at some time during the year.
- 1,471 children were born with a low birth weight (less than 2,500 grams or approximately 5.5 pounds).
- 20,128 children aged 17 and under were arrested.
  757 children were committed to youth rehabilitation centers or adult jails.

How many children are in your county?

What about children in your county? This year we include more county-level data to give you a broader picture of the children for whom you have greatest concern. County level numbers are not available for all indicators but we have provided you with numbers in such areas as poverty, divorce, education, juvenile justice, and health. This helps you see where your county is doing well and where there is room for improvement.

"The best way of judging society is in the way it treats its children. The society which neglects this duty, however well it may function in other respects, risks eventual disorganization and demise. Children are our resources. We should treat them in a way which respects their integrity and dignity."

. . . Michael Freeman, Professor of English Law, University College in London

Ten Year Trend

We have continued to examine as many indicators as possible over a ten year span. This will continue to be a goal of the report. In some trends we see cause for hope and in others cause for concern.

Hopeful findings include a steady increase in the number of places funded for children enrolled in Head Start Programs from 2,044 in 1989 to 3,680 in 1995. The number of women, infants and children receiving WIC food supplements almost doubled over the last ten years from 19,604 in 1987 to 35,059 in 1995. A similar increase occurred in the number of children receiving Medicaid due to eligibility

Sarah, age 18 and Lisa, age 14, are sisters.

"These children are not numbers in a book, like the chapter that defines their behavior and gives them a name, either dependent, neglected, or delinquent. These kids are a composition of their life experiences."

– District Judge John Icenogle, Kearney

requirements expanding at the federal level. We saw an increase from 43,944 children served in 1985 to 96,504 children in 1995. While the number of licensed foster homes dropped from 1,344 in 1985 to 637 in 1993, we saw a slight increase in 1995 to 765 licensed foster homes with a continued increase of approved foster homes.

Of concern, however, is a dramatic increase in the total number of children in foster care during a given year from 6,515 in 1985 to 10,249 in 1995. The steady increase in juvenile arrests is of equal concern when we examine the growth from 11,870 in 1986 to 20,128 in 1995.

Uncertainty remains in other areas such as child abuse and neglect where we see the number of substantiated cases of child abuse and neglect drop dramatically from 4,750 in 1985 to 2,072 in 1995. While we would like to believe this indicates a reduction in the abuse and neglect of our children, practitioners in the field do not see this reduction. They point instead to changes in policies and practices which give families the option of "voluntary" services. This may change the definition or categorization of "substantiated" but not the fact that the child was abused or neglected.

Our children . . . our future

Voices for Children intends to keep counting our kids and measuring trends. We will also be counting **dollars spent** on our children in a budget report to be released later this year.

Our commitment to data and budget monitoring has led us to participate extensively in the Nebraska Partnership Project for Health and Human Services with the hope of ensuring adequate databases in which agencies develop outcome-based measurements of programs and budgets. The results of that work are yet to be seen, but we encourage each of you to contribute to that measurement in whatever way you can. We need data at both the community and state level. We need to count clients who come through our door, clients who are served, and clients who are turned away so that we know the benefits as well as the consequences of changes that are made. We need to know if any child or family slips through the cracks during the time of transition. The Partnership initiative, which combines five human service agencies into one system of three functional agencies, will continue to take shape over the next three to five years. The results of the initiative will do much to shape the lives of our children and the future of our state.

Early Care and Education

Need for Quality Child Care and Early Childhood Education Programs

Early investments in children and families make a difference. The opportunities available to children today will have a profound impact on them throughout their lives. Typically, early childhood is defined as the period of a child's life from birth through age eight. Early childhood programs include preschools, home- and center-based child care, Head Start, Early Intervention (for children with disabilities), Kindergarten/Primary Education. In 1992 the Children's Defense Fund released a national study showing that Nebraska's spending on early childhood programs was among the lowest in the nation. Since then, Nebraska has begun to implement programs which address the developmental/learning needs of young children, although the numbers involved are small.

Early Childhood Initiatives

- Early Childhood/Parent Education Projects in four communities serving approximately 215 children and their families.
- Even Start Family Literacy Projects in four communities serving approximately 200 families with children under eight.
- Continuity Projects which extend part-day programs to full-day in six communities serving approximately 200 children.
- Early Childhood Special Education *(see Education section)*
- Nebraska Good Beginnings, an initiative of the Governor's Office, promotes community efforts to address the needs of families with young children through parenting education, optimum access to health services and high quality early childhood programs. Good Beginnings recognizes programs and communities making significant progress in addressing these service needs.

Marcus* builds with connecting blocks at Head Start in Omaha.

Impact

The best studies indicate that high quality child-focused care results in: increased cognitive abilities; a variety of better social outcomes including fewer contacts with the criminal justice system, fewer out-of-wedlock births, decreased reliance on social services as adults, and higher average earnings as adults; and improved physical health and nutrition.[1]
Also see Policy page.

"Half your money goes to day care, or more than half sometimes, if you don't have education."

– Susan,* a low-income mom who benefits from Title XX child care reimbursements.

Although we know that higher quality programs result in better outcomes for children, only about two dozen Nebraska early childhood care and education programs are accredited through national organizations. A voluntary and less costly state accreditation process is now under development.

Child Care

Nebraska leads the nation in the percentage of families in which both parents, or the only parent, is in the labor force, according to the 1990 U.S. Census. Especially for the 71% of all Nebraska children under 6 who live in families where both parents or the single parent works, child care is an important issue. Child care arrangements by parents vary, from the use of flexible work hours to care for children at home, care in the child's home, in someone else's home, a child care center or a preschool.

The cost of child care ranges from $67.50 to $106 weekly for infants, toddlers, and preschoolers, from $53.50 to $70 weekly for part-day care for school age children, and from $50 to $119 weekly for children with special needs, excluding the most expensive rates, and depending on the type of child-care provider, according to the Nebraska Child Care Market Survey 1995 conducted by the Nebraska Department of Social Services (NDSS).

Children playing at Head Start in Omaha.

Registered/Licensed Providers

Child care providers who care for four or more children must be licensed by NDSS. The number of licensed providers has increased from 3,182 in 1989 to 5,269 in June of 1995, a 65.6% increase. Approximately 76% of these providers are Family Child Care Home I providers (4,000), 5% are Family Child Care Home II providers (273), 13% are Child Care Centers (687) and 6% are preschools (309).

Child Care Subsidy

The Nebraska Department of Social Services, using federal and state funds, provides child care subsidies (full and partial) to families with incomes below 110% of the poverty line, to families receiving Aid to Dependent Children, and to a smaller group of families receiving subsidies due to abuse or neglect. 23,159 children were provided a child care subsidy by the Nebraska Department of Social Services in 1995. This represents an increase of 505 children since 1992. Subsidies are paid directly to providers in most cases; some families receive a voucher. The average subsidy paid to providers in 1995 was $1,174 per child annually. In 1995, Nebraska federal and state dollars provided a total of $27.2 million for child care subsidies.

Where do Nebraska children receive subsidized care? Number of children in care by child care provider type

Child care provider type	November 1992	November 1993	November 1994	November 1995
In home care	565	699	742	644
Family Child Care Homes I*	[illegible]	916	5,123	[illegible]
Family Child Care Homes II	505	748	643	556
Center-based care	[illegible]	735	5,195	[illegible]
Total	9,599	11,098	11,703	10,722

Source: Nebraska Department of Social Services.
*Includes approved and licensed homes.
Note: See definitions section on page 30 for detailed descriptions of child care provider types.

BEST COPY AVAILABLE

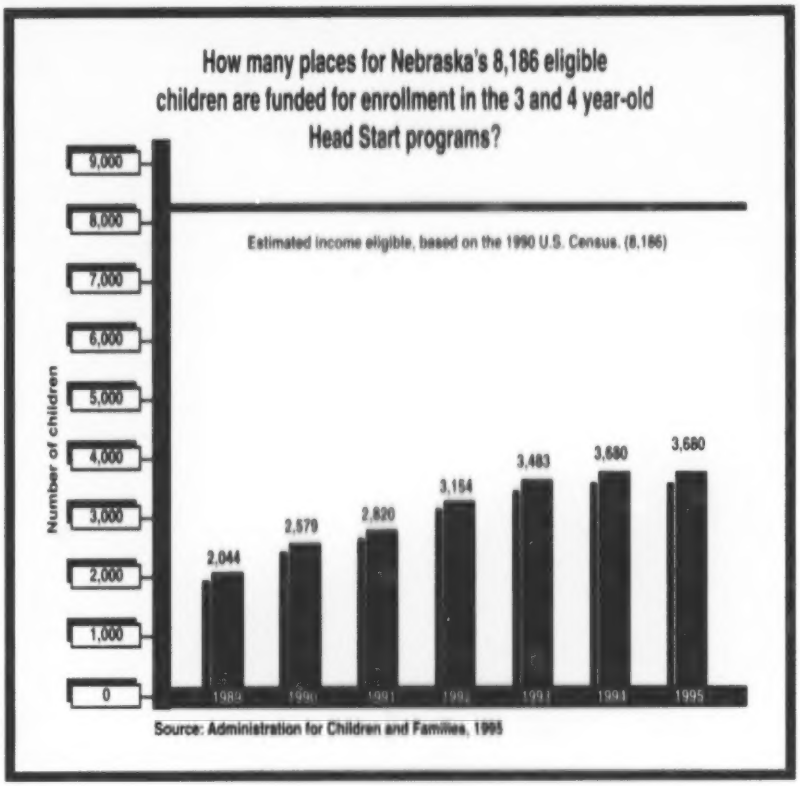
Head Start

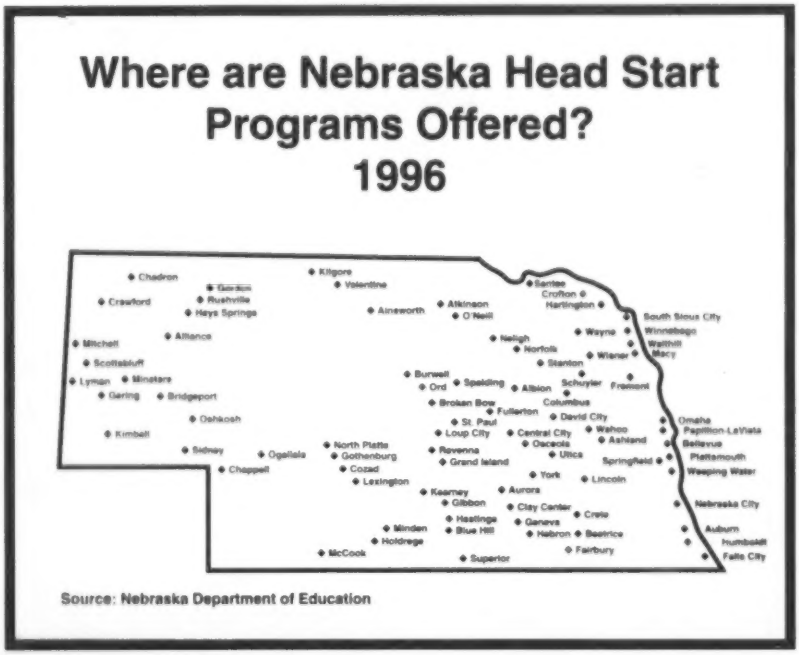
Head Start is a comprehensive program for infants and children in families with low income. It provides child development, parenting education and health and nutrition services. Since 1965, the federal government has provided grants directly to local organizations to run Head Start programs in their communities. Multiple studies of Head Start have shown that children who participate do better in school and eventually in the workplace.

In Nebraska not all eligible children participate due to lack of funding. Estimates from the 1990 U.S. Census indicate that 8,186 three and four-year-olds live in households with incomes below the federal poverty level and would be eligible for Head Start. In 1995, places for an estimated 45% of eligible three and four-year-olds were funded. Waiting lists are not uncommon where there are programs, but there are 29 counties in Nebraska where there is no Head Start program.

Head Start also serves other preschool age children; the total number of children served in Nebraska in U.S. Health & Human Services Department Head Start programs in 1994-1995 was 4,053. Of these, a total of 3,929 were enrolled in regular programs for 3 and 4 year olds for all or some part of 1995. The others were 1 and 2 year olds. An additional 187 Nebraska children participated in Native American Head Start programs and 200 in Migrant Head Start programs. About 14.8% of Head Start children have professionally diagnosed disabilities.

Federal funding has been increasing since 1989. Funded spaces in Head Start programs has increased from 2,044 children in 1989 to 3,680 in 1995. In fiscal year 1995 Nebraska received $15 million to fund its programs for three- and four-year olds. A total of 190,586 hours was contributed by volunteers who helped in local Head Start programs.





BEST COPY AVAILABLE

Alyssa receives her three month well-baby check-up at UNMC.

Births

In 1995, there were 23,221 live births to Nebraskans, including 366 sets of twins, 20 sets of triplets and 1 set of quadruplets. From 1986 to 1995 237,540 babies were born in the State. Most Nebraska babies enjoy good health, but statistics show that we still have a number of key areas to improve.

Prenatal Care

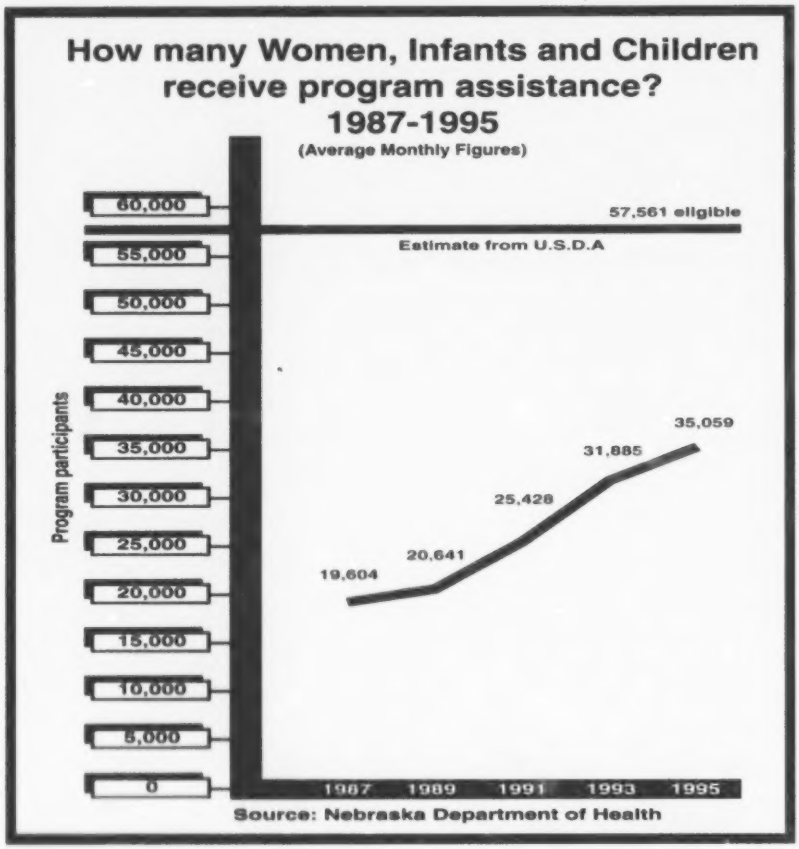
Early prenatal care increases the probability that babies will be born healthy, because medical problems can be detected earlier and high-risk health habits such as substance abuse and smoking may be curtailed. The percent of pregnant women receiving prenatal care during the first three months of pregnancy improved very little from 1986 to 1995: from 81.2% in 1986 to 83.6% in 1995 for all pregnant women.

A more comprehensive estimate of inadequate prenatal care is the Kessner Index, which combines information concerning the trimester when prenatal care began, the number of prenatal visits and the length of gestation of the pregnancy. In 1995, according to the Kessner Index, 4.8% of all Nebraska mothers, who are predominantly white, received inadequate prenatal care, little changed from 5.0% in 1990, when the Index was adopted for use. The percentage of Black mothers in Nebraska receiving inadequate prenatal care in 1995 was 11.6%, the percentage of Native American mothers was 21.3%, the percentage of Asian mothers was 5.3%, the percentage of mothers of other race was 21.5%, and the percentage of Hispanic mothers receiving inadequate prenatal care was 14.2%.

Low Birth Weight and Birth Defects

Low birth weight/premature birth is the third leading cause of death among all babies and the leading cause of death for babies born to African American women. In Nebraska in 1995, 1,471 (6.3% of all live births) babies were born at weights less than 2,500 grams (approximately 5.5 lbs.), the definition of low birth weight. The National and Nebraska objective is to reduce the percentage of babies born with low birth weight to 5% of all births by the year 2000. In 1995 a total of 1,770 birth defects in 837 births were diagnosed among all Nebraska births. Birth defects were reported three times more frequently among low birth weight babies than among those of normal weight.

Smoking during pregnancy is an important indicator of risk related to low birth weight, premature birth, and subsequent infant mortality. Tobacco use during pregnancy is associated with up to one-fifth of all low birth weight births. Among Nebraska women who gave birth from 1990 to 1995, the percent reporting use of tobacco during pregnancy decreased, from 20.7% to 17.3%, still well above the National Year 2000 goal of 10%.



WIC

Women, infants, and children are served by the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). Pregnant women and children under 5 at nutritional risk and in families with incomes at or below 185% of poverty are eligible for nutritious supplemental foods (cheese, milk, juice, cereal) and nutritional counseling.

WIC is effective in fulfilling its purpose to prevent poor birth outcomes (such as low birth weights) and improve children's health. The United States Department of Agriculture (USDA) estimated that in Nebraska, there were 57,561 women and children income eligible for this assistance in 1995. The 1995 monthly average WIC participation in Nebraska was 35,059, or 61.7% of the women, infants and children eligible. There are 19 counties in Nebraska which have no WIC clinic sites.

Teen Birth Rates

Babies born to teens are more likely to die in their first year than babies born to women 20-39. In Nebraska from 1986 to 1995, there were 80 births to girls age 10-13, 1,206 births to girls 14-15, and 6,540 births to girls 16-17. In 1995 there were 9 births to girls age 13, 139 births to girls 14-15 and 701 births to girls 16-17.

Teen births are often out-of-wedlock births. Out-of-wedlock births are related to poverty rates among single female-headed families. Poverty is not just an economic state; it also predicts many additional negative health, education and social outcomes. In Nebraska in 1995, 100% of births to girls aged 13-14 were out-of-wedlock; 93.5% of births to girls aged 15, 93.5% of births to girls age 16, and 86.4% of births to girls age 17 were out-of-wedlock.

Immunizations

The Center for Disease Control (CDC) has set a national immunization goal: that 90% of all two-year olds be immunized with four diphtheria-tetanus-pertussis (DTP) shots, three polio shots, and one measles-mumps-rubella (MMR) shot. In 1995, approximately 72% of Nebraska's two-year olds were minimally immunized, according to CDC estimates; the national coverage level is 75%. Additionally recommended are hepatitis B (Hep B), haemophilus influenza Type b (HIB), and varicella (chicken pox) shots. Child care facilities licensed by NDSS require the HIB shots along with DTP, polio and MMR shots.

By state law, the Nebraska Immunization Program annually surveys the immunization levels in both licensed child care facilities and in the public and private schools. In 1995 the coverage rate for two-year-olds in licensed child care facilities was 73%; the school-age coverage rate was 99.4%. From 1990 to 1995 in Nebraska there were 73 cases of pertussis (whooping cough), a potentially deadly disease for young children. Although all children must receive the minimal immunizations required by the State before they enter kindergarten, (unless a waiver is requested) many Nebraska children are unprotected between birth and age 5.

"More and more the popular thing to do when you're in high school is to have a child, and I believe it's idealized in many of their eyes and many have perceptions that their parents will then take on this child."

– Sabrina Prince, Coordinator for Child Saving Institute's Mama and Me Program. She relates that it is not unusual to find a fourteen-year old mom who has been abandoned by her own parents and family and left with nothing.

BEST COPY AVAILABLE

Blood Lead Levels

Children with elevated levels of lead in their blood are at significant risk for permanent brain damage. Lead poisoning can lead to decreased intelligence, behavioral disturbances, developmental disabilities, and blood and lymph disorders. In 1994, the blood lead levels of 6,115 children living in selected areas of Nebraska were tested. Of those tested, 679 or 11.1% had high lead blood levels of at least 10 micrograms/dl. At this level, CDC recommends beginning increased community monitoring and education efforts.

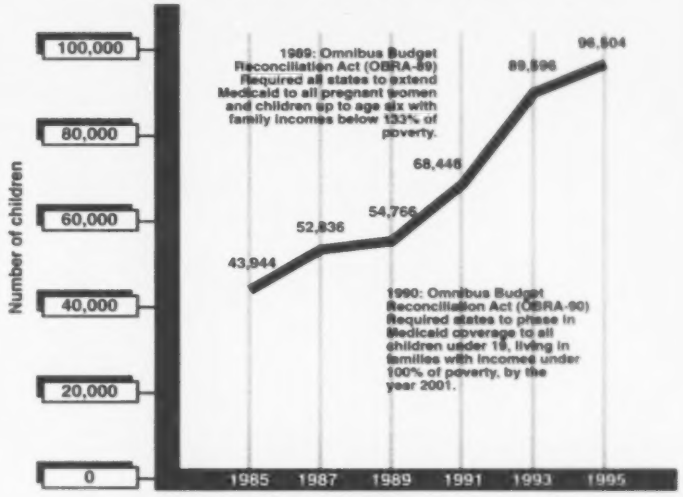
Medicaid

Nebraska Medicaid provides financial access to acute and preventive medical services for children in households with low incomes. All children receiving Aid to Dependent Children (ADC) benefits are automatically eligible for Medicaid. Children under 6 in households at or below 133% of the federal poverty line are also eligible, as are children aged 6-11 who live in families with income at or below the poverty line. As of July 1995, pregnant women and children under the age of 1 with a family income at or below 150% of the federal poverty level also became eligible for Medicaid.

Federal policy changes enacted 1986-1991 required states to expand services to more pregnant women and children who live in families with income below poverty. Expansion of eligibility will be complete in the year 2001 when all children under 19 living in families at or below the poverty line will be eligible. Due to these changes, between 1986 and 1995 the number of Nebraska children served by Medicaid has increased sharply, from 49,295 in 1986 to 96,504 in 1995.

In Nebraska in 1995, low income children were 57.6% of all Medicaid recipients, but only 22.0% of all Medicaid expenditures were for services for those children. Medicaid also provides medical assistance to the low income elderly (34.6% of all expenditures in 1995) and to the blind and disabled (36.2 % of expenditures.) About 7.2% of Medicaid expenditures were for services to ADC adults.

How many Nebraska children received Medicaid?
1985-1995
When did major federal policy changes take place?



Sources: Nebraska Department of Social Services *Annual Reports*, 1985-1995;
Note: Does not include certain children with disabilities.

Access to Health Care: Health Insurance

Access to health care is linked with health outcomes for children. According to the U.S. General Accounting Office, (GAO), many children remain uninsured despite the expansion of Medicaid to many needy children. GAO estimates using Current Population Survey data show that in 1993 in Nebraska approximately 9.2% of the child population were uninsured, 14.1% of the child population were provided health care through Medicaid, and another 60.1% were served by employer-based insurance.

Child Deaths

There is a great difference in causes of death for infant children and for children from one to nineteen years. Children under one year have much higher mortality rates than older children and the majority of their deaths are due to factors related to their general health and weight at birth. Older children are more likely to die of accidental injuries, suicide and homicide—factors not as closely related to physical health.

Infant Mortality

In 1995, 172 Nebraska babies born alive died before reaching their first birthdays. This translates to an infant mortality rate of 7.4 deaths per 1,000 live births and was less than the U.S. rate of 8.4 in 1995, but higher than the Nebraska Year 2000 Objective of 5.0 deaths per 1,000 live births. The five year rate for Nebraska for the years 1991-1995 of 7.8 deaths per 1,000 live births is less than the five year rate for

Impact

Children without health insurance are less likely to have access to preventive health care services. This lack of health insurance also can impact health care costs for the entire health care system, because children eventually seek care in higher cost settings such as hospitals and emergency rooms.[8]

Also see Policy page.

BEST COPY AVAILABLE

Primary Causes of Infant Death in Nebraska 1986-1995

Cause	Frequency
Health/Medical (natural) Causes	
Heart Disease	55
Pneumonia	36
Birth Defects	497
Maternal Complications*	94
Placenta Complications*	61
Prematurity*	123
Hypoxia Asphyxia*	39
Respiratory Distress Syndrome*	82
Other Respiratory Conditions*	123
Perinatal Infections*	38
Other Perinatal Conditions*	129
SIDS	392
All Other Causes	227
Non-Health Medical Causes	
Accidents	49
Homicides	19
Other Injury	4
TOTAL	**1,968**

Source: Death Certificates, Health Records, Management, Nebraska Department of Health.
***A significant proportion of these deaths are related to prematurity and low birth weight.**

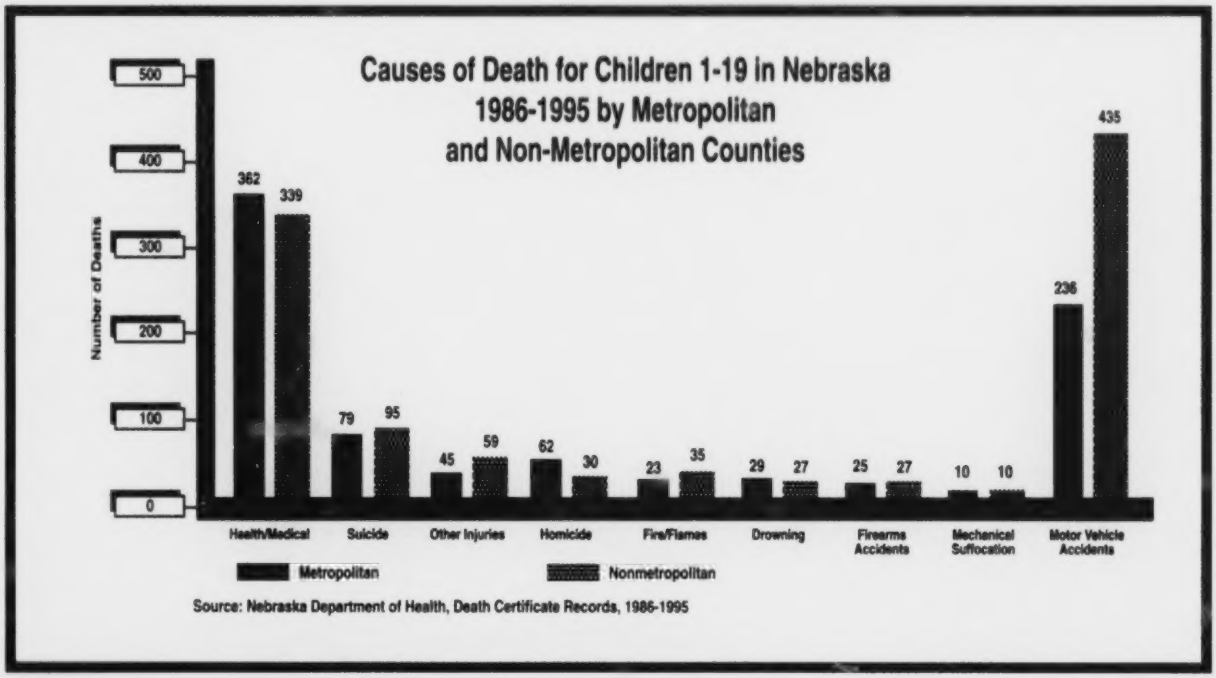
1986-1990 of 8.8. The 1995 African American infant mortality rate in Nebraska was 10.7 deaths per 1,000 live births, and the Hispanic infant mortality rate was 11.2, both substantially higher than the 7.3 infant mortality rate for Whites. The Native American infant mortality rate in 1995 was 5.8, which was lower than in previous years.

The leading cause of infant deaths was birth defects. Many deaths are also associated with prematurity. Low birth weight, though not necessarily a direct cause, was associated with 61.6% of Nebraska's infant deaths. There has been a dramatic decrease in Sudden Infant Death Syndrome (SIDS) in the last two years in Nebraska, from 47 in 1993 to 23 in 1995, since information has reached parents and child-care providers that an infant should be put on its back rather than its stomach when sleeping.

Mortality Among Children 1-19

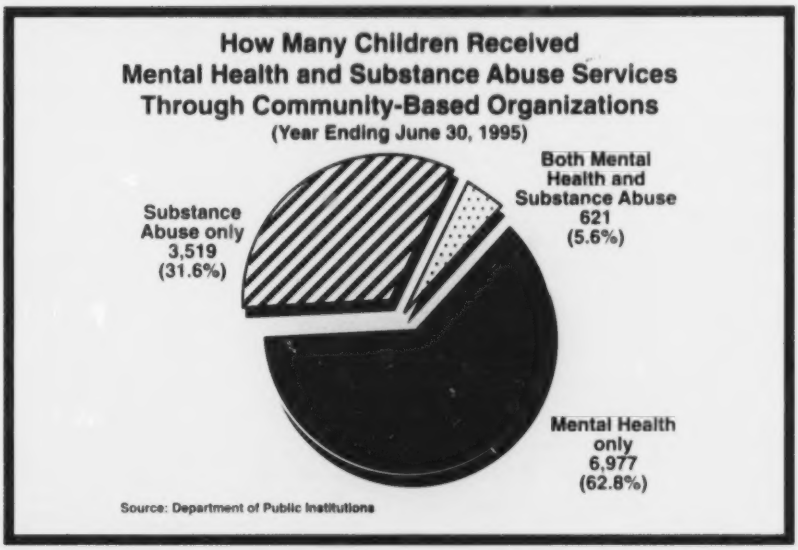
In 1995 there were 171 deaths among Nebraska children aged 1-19. Of these 58 (33.3%) were health-related, with cancer the leading cause. Another 15 (8.7%) child deaths were suicides and 20 (11.7%) deaths were homicides. Of the total, 76 (44.4%) were caused by injuries. Motor vehicle accidents remain the leading cause of injury-related deaths, accounting for 53 deaths.

According to the Nebraska Department of Roads (NDR), accident reports show that motor vehicles were also responsible for 4,064 disabling and visible injuries to children in 1995. Alcohol was involved in 22% of all child deaths due to motor vehicle accidents, and 8% of all disabling and visi-



Source: Nebraska Department of Health, Death Certificate Records, 1986-1995

BEST COPY AVAILABLE


How Many Children Received
Mental Health and Substance Abuse Services
Through Community-Based Organizations
(Year Ending June 30, 1995)
Both Mental Health and Substance Abuse 621 (5.6%)
Substance Abuse only 3,519 (31.6%)
Mental Health only 6,977 (62.8%)
Source: Department of Public Institutions

ble injuries to children in reported motor vehicle accidents, according to NDR.

Alcohol, Tobacco and Other Drug Use

Among 2,037 Nebraska youth in grades 9 to 12 surveyed, 89% report having used alcohol, according to the 1995 Youth Risk Behavior Survey commissioned by the Nebraska Department of Health in conjunction with the Nebraska Department of Education and the U.S. Center for Disease Control and Prevention (CDC). About 70% reported having smoked during their lifetimes. Alcohol use was highest among seniors in high school: 47% of 9th graders, 49% of 10th graders, 62% of 11th graders and 66% of 12th graders reported drinking during the last 30 days. When students drink, they often drink at least 5 drinks in a row (binge drinking): 45% of male students and 37% of female students reported binge drinking at least once during the last 30 days. Regular smoking habits were highest among 11th graders, with 39% reporting smoking at least one cigarette every day for 30 days. A total 18% of students (31% of males and 3% of females) reported using chewing tobacco or snuff during the last 30 days.

Nebraska youth grades 9 to 12 also reported use of other drugs: 24% reported using marijuana, 17% reported using inhalants (sniffed glue, breathed the contents of spray cans or inhaled paints or sprays to get high), 10% used other drugs (including LSD, PCP, ecstasy, mushrooms, speed, ice, heroine, or pills without a doctor's prescription), 4% used cocaine (including crack, powder and free-base), and 3% have used steroids. Alcohol, tobacco and other drug use has increased since 1993.

Younger students were also surveyed. Among 1,356 randomly selected 7th and 8th graders, 70% had drunk alcohol, 53% had tried cigarette smoking, 13% had used marijuana, 22% had used inhalants, and 33% of males had tried chewing tobacco or snuff.

Mental Health and Substance Abuse Treatment

The following data on mental health and substance abuse are based only on children and adolescents receiving services from community-based and residential programs funded by the Nebraska Department of Public Institutions (DPI). Because the private sector information is not available, these data do not include the total number of children and adolescents with mental health and substance abuse problems receiving specialized services in Nebraska.

Community-Based Organizations

During the year ending June 30, 1995, there were 11,117 children who received mental health and substance abuse services through community-based organizations. About 62.8% received mental health services only, 31.6% received substance abuse services only and 5.6% received both mental health and substance abuse services.

Most children who receive services (9,275 or 83.4%) through community-based organizations participate in outpatient programs with counseling for either mental health and/or substance abuse. Other publicly funded services available through community-based organizations include substance abuse prevention, partial care and halfway house services, mental health day treatment, emergency psychiatric services and therapeutic group home services. There were 1,413 children with serious emotional disturbances served during 1995. Approximately 25% of children using community-based programs received behavioral health services outside their county of legal residence.

Among the children receiving substance abuse treatment services, 57% were treated for alcohol related problems, 10% for drug related problems, and 33% for both alcohol and drug related problems. A total of 600 children received prevention counseling services or services as a part of a family unit where a parent or sibling has a substance abuse problem.

Residential Care

The Nebraska Department of Public Institutions also funds residential services through the Lincoln, Norfolk and Hastings Regional Centers. A total of 428 adolescents between 12 and 19 years of age received behavioral health services through Nebraska's three regional centers at Lincoln, Hastings, and Norfolk during the year ending June 30, 1995.

Residential Care is also utilized for children with developmental Disabilities. There were 9 children in residential care at the Beatrice State Developmental Center in 1995.

BEST COPY AVAILABLE

Child Abuse and Neglect/Domestic Violence

Over 3,500 Nebraska Children

Children need safe families and nurturing environments to grow up strong and healthy. But in 1995, a total of 3,510 children in Nebraska were involved in substantiated cases of child abuse and/or neglect. In 72.2% of the cases, the perpetrator was the child's parent or a guardian living with the child.

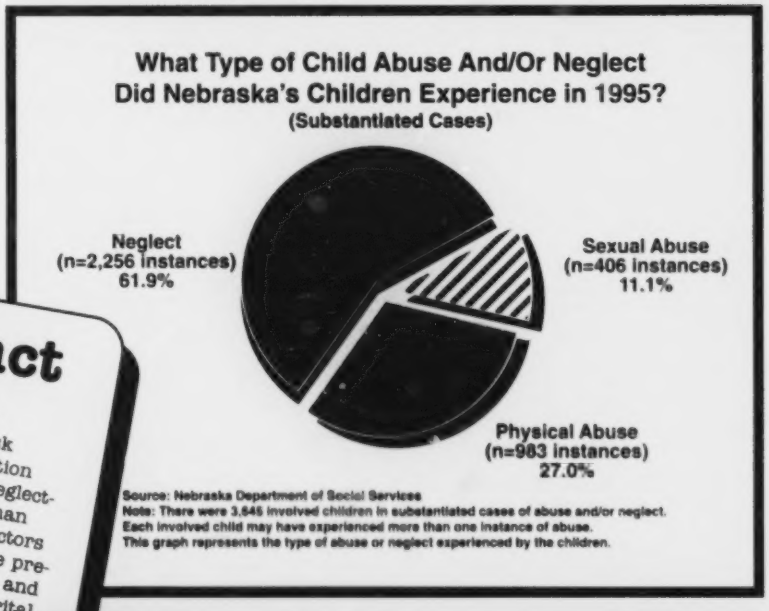
Substantiated Cases

In 1995 there were 7,858 cases of child abuse and neglect investigated by the Nebraska Department of Social Services (NDSS). Of those, 2,072 were substantiated. Each case represents a household and may involve more than one child. The number of child abuse investigations has not changed much since 1986, but the number of cases substantiated has decreased. Since 1986, the proportion of substantiated cases decreased from 59.9% of those investigated in 1986 to 26.4% in 1995. Nationally, an average of 38% of cases was substantiated in 1993. A case is substantiated when credible evidence of maltreatment is determined by a court or NDSS.

Kim and her 22 month old son, Trey .

Kim's Story:

Kim is a 24 year old single mom of two young boys. She began drinking alcohol at the age of twelve, and finally entered recovery after Child Protective Services intervened and removed her older son for a year. Kim has been sober for several years, and has been working hard to be a good mom. She says, "every counselor I've had says I'm a really good parent."


What Type of Child Abuse And/Or Neglect Did Nebraska's Children Experience in 1995?
(Substantiated Cases)
Neglect (n=2,256 instances) 61.9%
Sexual Abuse (n=406 instances) 11.1%
Physical Abuse (n=983 instances) 27.0%
Source: Nebraska Department of Social Services
Note: There were 3,645 involved children in substantiated cases of abuse and/or neglect. Each involved child may have experienced more than one instance of abuse. This graph represents the type of abuse or neglect experienced by the children.

Impact

A 1993 Office of Juvenile Justice and Delinquency Prevention longitudinal study that sampled high risk youth, described a link between childhood victimization and delinquent behavior indicating that abused or neglected children are more likely to be violent offenders than non-abused children. Negative family involvement factors that are predictors of delinquency include: inadequate prenatal care, parental rejection, inadequate supervision and inconsistent discipline by parents, family conflict, marital discord, physical violence, and child abuse.* Also see Policy page.

BEST COPY AVAILABLE

"Children who have been neglected and abandoned usually fare worse than children who have been abused, because something is better than nothing."

– Debra Combs, MSW, Attachment and Bonding Center of Nebraska.

Majority of Children Remain in Home

In 1995, the majority of children involved in substantiated cases (58.9%) remained at home with their parents at the conclusion of the investigation, down from 77.5% in 1989. Twenty-five percent were removed from the home by court-order and 5.4% were voluntarily placed outside the home by the parents. An additional 5.4% were removed but then reunited with their families and 5.0% of the children's cases were pending.

Neglect Most Common Type

Child abuse is classified as neglect, physical, and/or sexual abuse. A child may experience more than one type of abuse. For example, a child may experience both physical and sexual abuse. In this case, two instances of abuse are counted. The graph reflects the number of instances of abuse, not the number of children. Neglect was the most common instance of abuse in 1995 (2,256 children or 61.9%). Physical abuse was next common (983 children or 27.0%). There were 406 (11.1%) instances of sexual abuse in 1995; about 44.3% of these children (180) were victims of incest.

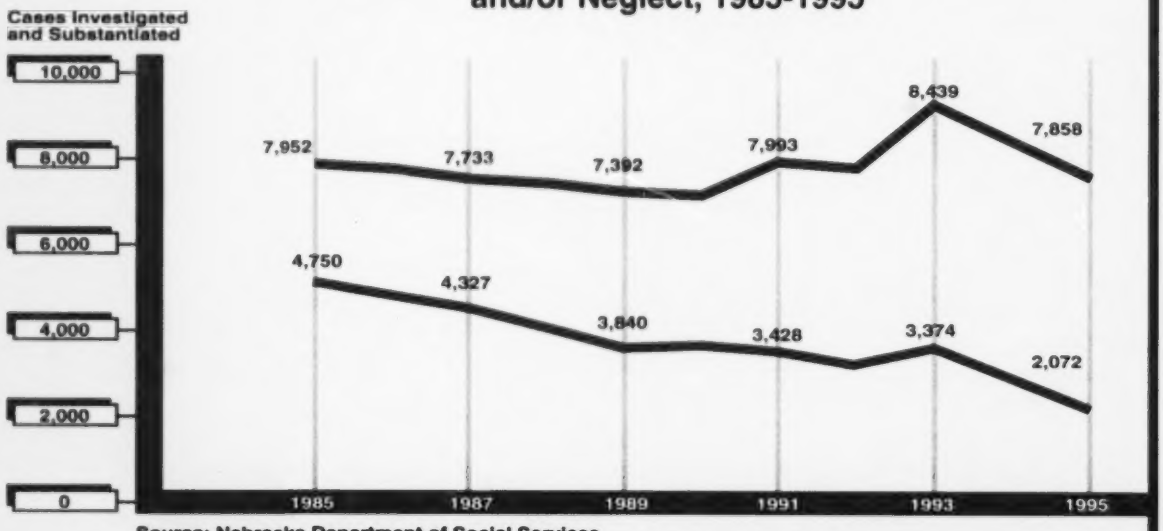
Not All Reports of Child Abuse are Investigated

It is important to note that these statistics involve investigated reports of child abuse and neglect. Available statistics do not track the number of calls reporting suspected abuse and neglect; only investigated cases are counted.

Domestic Violence Shelters

Nebraska has 22 domestic violence shelters/programs across the state, according to the Nebraska Domestic Violence Sexual Assault Coalition. The coalition reported that 6,196 children received services in domestic violence shelters in 1995. A total of 24,914 beds were provided to children and adolescents during the state fiscal year ending in June 1995. The number of children in homes reporting domestic violence was 4,762. Of these 87% were reported as witnessing violence, 14% were physically harmed and it was suspected that 3% were sexually abused.

Investigated and Substantiated Cases of Child Abuse and/or Neglect, 1985-1995



Source: Nebraska Department of Social Services
Note: There may be more than one child involved in each investigated/substantiated case.

Cases Investigated **Cases Substantiated**

Out Of Home Care

Dan, 18, Class of 1996 from Boys Town High School. "Boys Town taught me the skills to go out and live a very successful life, has shown me I can achieve my goals in the classroom and has pushed me the extra steps that will help me have a successful future."

"Please pay attention to the rights of children. In Nebraska, it seems to me that we pay a lot of attention to the rights of parents and children don't have rights."

– Carol,* an adoption caseworker.

Impact

Research indicates that on a variety of outcome measures adopted children fare much better than those youngsters who are reared in institutional environments or in foster care. Furthermore, adoptees do significantly better than those children who are reared by biological parents who are ambivalent about caring for them or, in fact, do not want them.* Also see Policy page.

Leaving Home: 10,249 Children in Out-of-Home Care in 1995

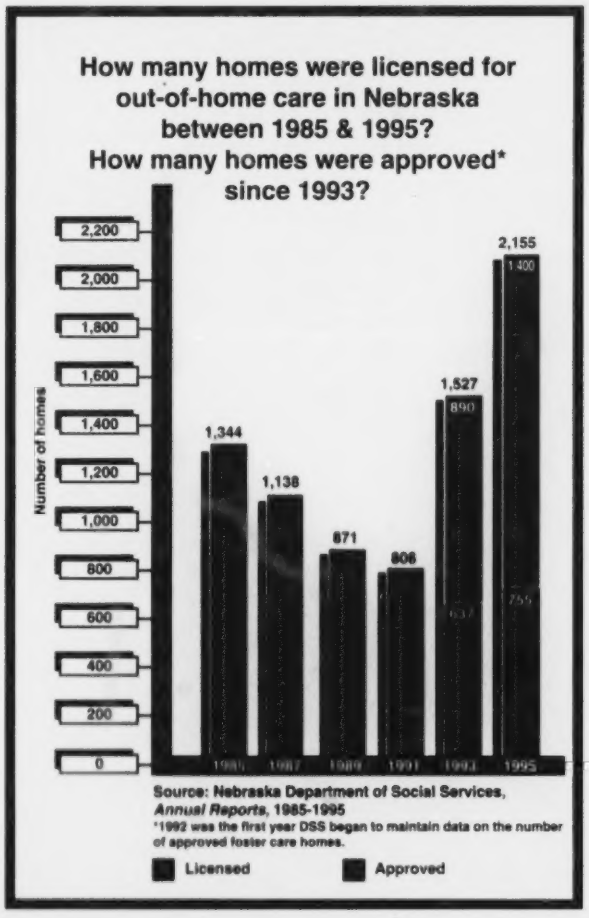
Children may leave or be removed from their homes and families for a variety of reasons and for different lengths of time. Out-of-home care is intended to improve the child's well-being on a short-term basis, while the family resolves its difficulties or until a long-term alternative is found. The State Foster Care Review Board (FCRB) maintains a tracking system of all children 0-18 in Nebraska who are in out-of-home care three days or longer. Trained citizen boards reviewed approximately 60% of these cases this year.

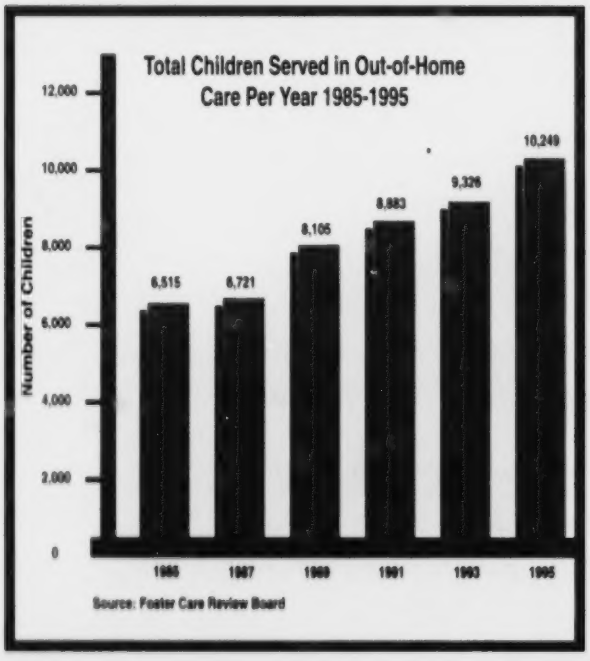
Data from the Foster Care Review Board indicate that during calendar year 1995, a total of 10,249 Nebraska children were in out-of-home care with a variety of agencies at some time during the year. There were 4,566 children in care on Jan. 1, 1995 with an additional 5,686 removed from their homes during the calendar year. The majority were placed in foster care homes, but some also were placed in group homes, institutions, private placement and correctional facilities. At year's end 4,229 children were in care. Of those children, 38.6% had been placed in out-of-home care before.

Not all children can be placed in foster care homes near their families of origin, which facilitates reunion. Only 51.9% of children in out-of-home care in September 1996 were placed in their home county.

Race and Ethnicity of Children in Out-of-Home Care

Also from the FCRB tracking system, we find that Black, Native American, Hispanic and Asian children enter out-of-home care at rates higher than their proportion in the Nebraska child population as a whole. According to the 1990 U.S. Census, Black children composed 4.8% of the child population of Nebraska. In 1995 they composed 16.8% of children in out-of-home care. Hispanic children composed 3.4% of the child population, and were 4.3% of children in out-of-home care. Native American children were 1.1% of the child population, and were 4.9% of children in out-of-home care. Asian children composed 1.0% of the child population, and 1.3% of children in out-of-home care. Non-Hispanic white children comprised 57.0% of the out-of-home care population, and 89.6% of the child population. Children of mixed race were 15.7% of the children in the out-of-home population, but we have no reliable estimates of their proportion of the child population from the census or other surveys.





FCRB data for calendar year 1995 show that children who were placed out of the home spent an average of 2.6 years in care. On average, of children reviewed by FCRB, those age 0-4 years had spent 59.9% of their lives, those age 5-9 had spent 38.4% of their lives, and those age 10-17 had spent 25.7% of their lives in out-of-home care.

3,247 in NDSS Custody

The FCRB shows a total of 4,229 children in out-of-home care on December 31, 1995. The majority of these children (3,247) were legal wards of the State in the custody of the Nebraska Department of Social Services (NDSS).

Average Number of Moves

FCRB data for NDSS children placed out of the home on December 31, 1995 show that the average number of moves per child was 5 moves. Moves are significant because they often include a change in caretaker, environment, and educational institution. A move is counted when a child leaves the family of origin, changes foster homes or residential facilities or moves to/from an inpatient psychiatric facility.

Licensed Foster Care Homes

Placement with foster parents is considered the least restrictive type of out-of-home placement. There are two main types of foster care homes: licensed foster care homes and approved foster care homes. Licensure is not child-specific, and requires responses to references and criminal record and child abuse registry checks. It also requires care-givers to participate in a series of interviews and initial and continuing foster parent training. Approved foster care homes require less: one home visit meeting all adults who live in the home, with a check of criminal records and the child abuse registry. Many of the foster parents in approved homes are relatives or had known the children prior to placement. Approved homes are restricted as to the number of children and families served. There were a total of 2,155 licensed and approved foster care homes as of June 30, 1995. Of these 755 (35%) were licensed and 1,400 (65%) were approved. The number of licensed homes has decreased from 1,138 in 1987 to 755 in 1995. The number of approved homes has increased from 890 in 1993 when NDSS began to maintain these data to 1,400 in 1995.

"We're really powerless here, we have no standing in court. We're the ones that are with them and take a lot of the responsibility off the Department of Social Services, and yet they go to court and say what they want."

– Joan, a foster care professional shares her frustration about therapeutic foster parents not being able to testify on the best interests of children in juvenile court

Education

High School Graduates and Completion Rate

In 1995, 19,771 Nebraska youth graduated from high school. An additional 407 Nebraska youth received GED's or other certificates of high school completion. The 1995 high school completion rate for the state—a percentage based on the number graduating as a proportion of the number starting 9th grade four years earlier—was 84.9%. The Nebraska Education Goal is to reach 95% by the year 2000. (This percentage is a net percentage only and may have been affected by in- and out-migration and/or deaths within the cohort.)

Secondary School Dropouts

In the 1994-1995 school year 2.9% (4,199) of Nebraska youth enrolled in 7th to 12th grades dropped out of school. Of those students, 3,367 dropped out of grades 10-12 and 832 dropped out of grades 7-9.

Minority youth were more likely to drop out of school in the 1994-1995 school year than non-Hispanic white youth. Among seventh to twelfth graders, 2% (2,764) of Whites enrolled dropped out of school while 10.6% (148) of enrolled Native American youth, 11.4% (825) of Black youth and 8% (373) of Hispanic youth dropped out. About 5.1% (89) of Asian youth dropped out.

Number of Students Expelled

In 1994-1995 283 students were expelled from Nebraska public schools. Of those expulsions, 66% were White, 15% were Black, 11% were Hispanic, 6% were Native American, and 2% were Asian. LB658, to go into effect in January 1997, mandates that Nebraska school districts must provide alternative education for all expelled students.

Rose teaches Danielle, Karena, Lameaka, and Karen at the Summer Youth Career Exploration program through Owens Educational Services. The Career Exploration engages kids in activities that are career oriented, and shows "high-risk" kids that there are alternatives.

School Year 1994-95	Number Enrolled	Number Dropouts	Percent Dropout
All 7-12 Graders	144,553	4,199	2.9%
American Indian/Alaska native	1,391	148	10.6%
Asian/Pacific Islander	1,757	89	5.1%
Black, Not Hispanic	7,219	825	11.4%
Hispanic	4,669	373	8.0%
White, Not Hispanic	129,517	2,764	2%

Source: Nebraska Department of Education
Note: Includes both public and private schools.

BEST COPY AVAILABLE

Special Education

On December 1, 1995 there were 39,926 children with a verified disability receiving special education services in Nebraska. This is 12.1% of all students enrolled in public and private schools in September, 1995. From 1992 to 1995 the number of special education students increased by 11.9%.

Early diagnosis of a disability can make a crucial difference in the development of a disabled child. On December 1, 1995, there were 4,029 children from birth through five who were verified with a disability receiving special education services. This represents a 12.7% increase since 1992.

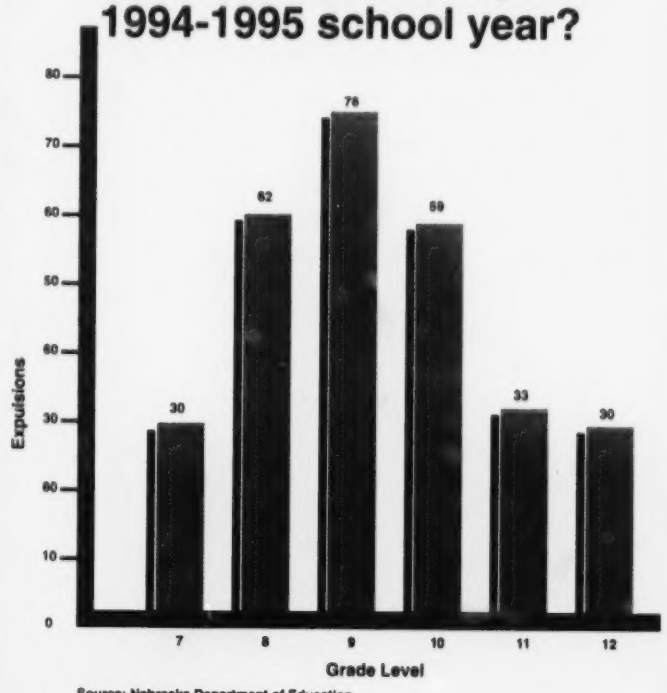
The majority of children receiving special education services did so through the public schools. Based on 1995 data, 87.4% of school-age children with disabilities received special education services in their resident school district. School districts in Nebraska spent $179.7 million in school year 1994-1995, an increase of 7.5% over 1993-1994. Of the total expended $12.1 million was spent for school age transportation, $150.0 million for school age instruction, and $17.6 million for the instruction and transportation of disabled children less than age six.

Special Education Students Served by Type of Disability - 1995

Specific Learning Disability	15,444
Speech-Language Impairment	11,552
Mild Mental Handicap	4,681
Behavioral Disorder	2,879
Other Health Impairments	1,799
Moderate Mental Handicap	867
Orthopedic Impairments	778
Hearing Disabilities	663
Multiple Impairments	473
Visual Disabilities	263
Severe/Profound Mental Handicap	240
Traumatic Brain Injury	146
Autistic	136
Deaf or Blind	5
Total	39,926

Of the 39,926 children, only 7% (2,807) spend all their school time in a special education class.
Source: Nebraska Department of Education

How many Nebraska children were expelled during the 1994-1995 school year?



Source: Nebraska Department of Education
Note: Total number of expulsions = 290.

"I dropped out of school at the beginning of my junior year, when I decided to get out of trouble. When you're in a gang, you never get out. Gang members are everywhere, so just being in school poses a threat. I tried talking to a counselor about it, but there's nothing she could do."

–James, recent high school dropout

Impact

Each year's class of dropouts costs the nation $250 billion in lost wages and foregone taxes over their lifetimes.*
Also see Policy page.

Economic Well Being

In 1990 the U.S. Census counted 58,474 children (about 13.8% of all children under 18) living in poverty in Nebraska. In 1980, the U.S. Census had reported that 53,278 children lived in poverty. The proportion of children who were poor went up 11.6% between 1980 and 1990.

Each year the annual March Current Population Survey conducted by the Bureau of the Census re-estimates population and poverty counts for each state. Since the CPS is a sample survey of about 700 households with relatively few interviews in Nebraska, the small differences in the annual CPS poverty estimates since 1990 are likely due to differences in the sample—we cannot say with statistical certainty that there has been any change in children's poverty since 1990. Thus, even though in Nebraska we know that incomes are up, and that statistically measured unemployment rates are down, there is no reliable evidence that poverty among children has increased or decreased. Even though there are more jobs, these jobs are not necessarily better-paid jobs, or full-time, full-year jobs which might raise family income level above the poverty line. And, a larger increase in single parent families with only one worker than in two-parent families may mean that more families have trouble making ends meet.

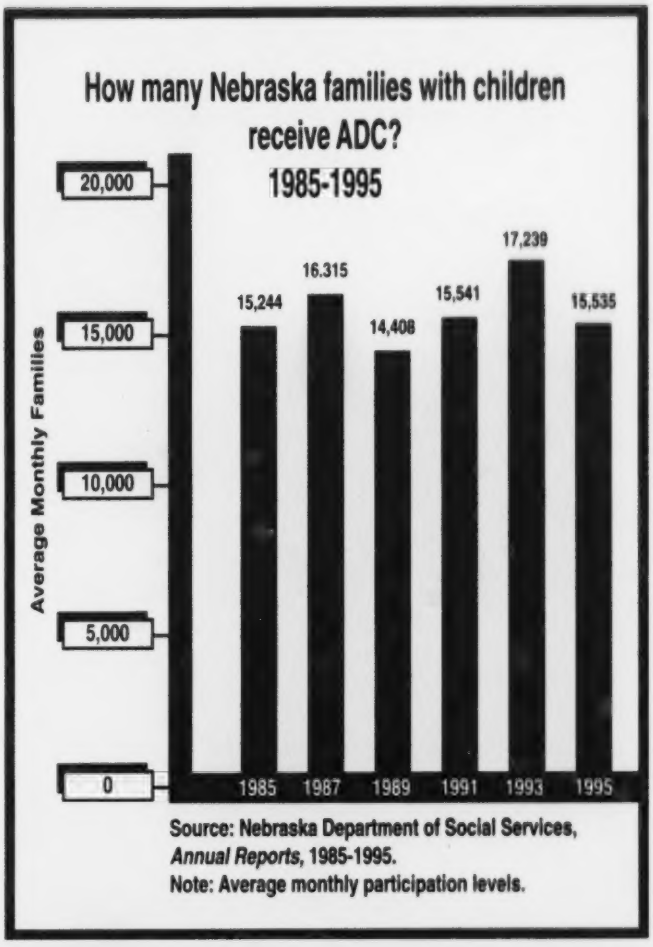
Consuelo and her four children, Yesenia, Rafael, Mario, and George. They receive health-care through the Indian Chicano Health Center in Omaha.

Earnings from work are the primary source of income for all families with children who live in poverty in Nebraska. Approximately 80% of heads of households in poor families who were not elderly or disabled in Nebraska worked all or part of the year, according to the 1990 U.S. Census. Only 13% of the income of poor families in which the head is not elderly or disabled comes from public assistance – primarily Aid to Dependent Children (ADC) or Supplemental Security Income (SSI). The number of full-time, year-round working parents in Nebraska with "low earnings" as defined by the Census rose from 24,360 in 1980 to 32,804 in 1990, an increase of more than one-third.

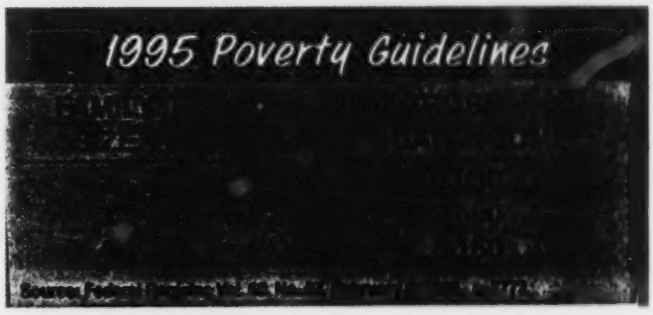
The poverty of families with working parents may be related to two facts: (1) many jobs are not full-time, year-round jobs, and (2) even full-time, year-round work at the minimum wage is not enough to lift a family above the poverty line. When the new federal minimum wage law of $5.15 per hour is fully implemented in 1998, a family of three with a full-time worker (52 weeks per year, 40 hours per week) will still be approximately $2,554 below the federal poverty line.

Impact

Across an astonishing range of outcomes—including premature death, stunted growth, physical impairment, injury, learning disability, low educational achievement, school failure, abuse and neglect, extreme behavioral problems and delinquency—poor children fare worse than children who grow up in families that are able to meet their basic needs.•
Also see Policy page.



Source: Nebraska Department of Social Services, *Annual Reports*, 1985-1995.
Note: Average monthly participation levels.



Earned Income Tax Credit

This tax credit helps low and moderate income working families to keep more of their earned income. In Nebraska 104,451 working families received the federal EITC in 1994. In Nebraska, legislative proposals to establish an earned income credit for the state income tax have failed in recent years.

Single Parent Families

Children living in single parent families have a greater chance of living below the federal poverty line. Based on the 1990 Census, 41% of all related children living in single-parent families in Nebraska fell below the poverty line. Of all children below the poverty line, 49% lived in a single-parent family headed by a mother, 4% lived in a single-parent family headed by a father, and 48% lived in a two-parent family. A major reason that children in single-parent families—where there is only one possible wage-earner—live in poverty is the lack of adequate child support.

Divorce and Child Support

In 1995 there were a total of 6,262 divorces; 3,719 or 59.4% of these divorces involved a total of 7,079 children under 18. Although most divorces result in an order by the court for child support to be paid by the parent who does not live with the children (84.2% of divorces involving children in 1995), not all such support orders are honored. Nebraska established a system to enforce child support orders in 1984.

Any family in Nebraska can request child support assistance from NDSS. In 1995 there were a total of 112,981 children whose parents received services from Nebraska's child support system within the Department of Social Services (NDSS). Only 16% of these children were receiving Aid to Families with Dependent Children (ADC). A total of $95.9 million was collected in child support payments. $84.4 million was collected on behalf of non-ADC children, but $38.5 million was not paid. $11.6 million was collected on behalf of ADC children, but $17.1 million owed was not collected.

Aid to Families with Dependent Children (ADC)

ADC provides cash assistance to families with children with gross incomes at or below 65% of poverty and countable income at or below 35% of poverty. If a family of three has no countable income, the family can receive a maximum benefit of $364 a month. Nebraska's "need standard" has been in effect since July 1988. By July 1995 that $364 was worth only $284 due to inflation. Had the annual inflation rate been applied, the July 1995 benefit would have been $468.

The monthly average number of families in Nebraska receiving ADC benefits in State Fiscal Year 1995 was 15,535. Of families receiving ADC, on average 80.4% also received food stamps. A Nebraska family of three receiving the maximum ADC benefit and the maximum food stamp benefit of $304 monthly lived at only 64% of the federal poverty line in 1995.

BEST COPY AVAILABLE

Food Stamps

Food Stamps are coupons redeemable in retail food stores. They are available through NDSS to eligible families living at or below 130% of poverty, to help increase their purchasing power to buy an adequate low-cost diet. The monthly average number of households receiving Food Stamps in State Fiscal Year 1995 was 43,752. 12,485 (28.5%) of these households also received ADC. NDSS estimates that 50.5% of all Food Stamp recipients are children.

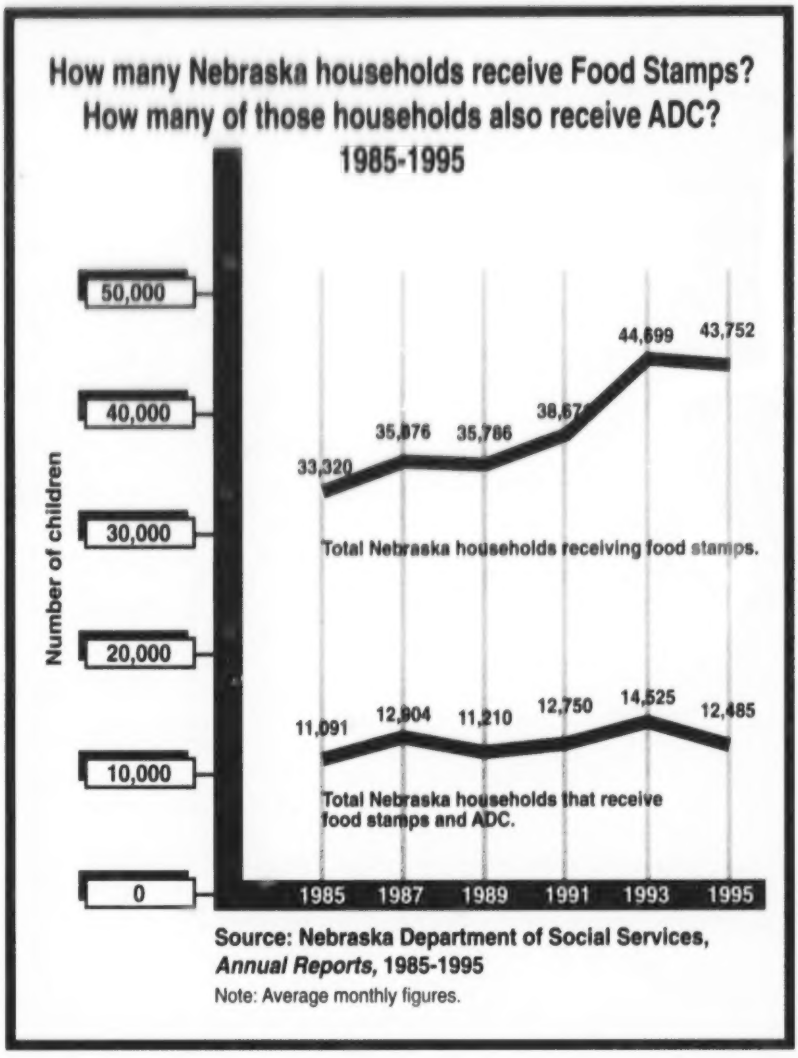
National School Lunch Program Through USDA

In 1995, 52% (468) of Nebraska's school districts participated in the National School Lunch Programs, which provide some lunch benefits to children at all income levels who participate and include free and reduced price school lunch to needy children. Approximately 84.7% of Nebraska school children (280,046 children of all 330,800 children in Nebraska's public and private schools) had access to school lunch programs through their local school districts.

Children living in poverty in school districts without school lunch programs do not receive free school lunch. In districts with programs, children from families with incomes at or below 130% of poverty may receive free lunch and/or breakfast at school; children from families with incomes between 130% and 185% of poverty may receive reduced price meals. In 1995, on average 193,240 Nebraska children participated daily in the school lunch program. Of these, 70,649 children on average received a free or reduced price school lunch each day.

National School Breakfast Program Through USDA

In 1995, 15% (137) of all Nebraska school districts offered free or reduced price school breakfast programs. On average in 1995, 21,224 children participated daily in the school breakfast program. Of these, on average 15,104 children received a free or reduced price school breakfast each day.



Source: Nebraska Department of Social Services, *Annual Reports*, 1985-1995

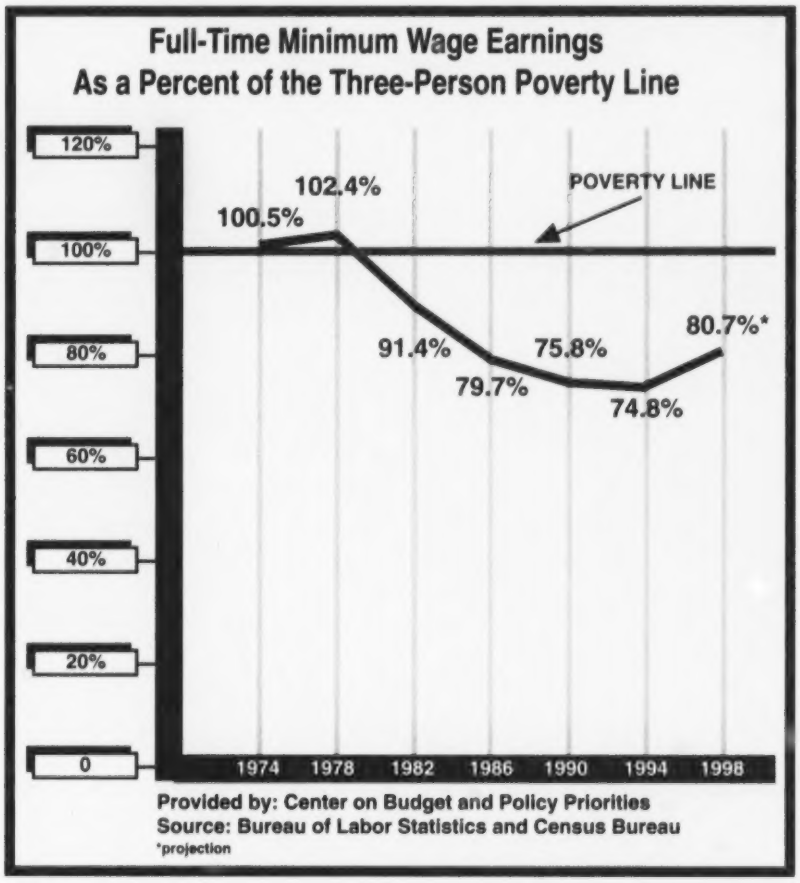
Note: Average monthly figures.

"If my daughter received child support I could take a $6 an hour job."

– Mary*, a mom who struggles to pay child care, health care, and basic living expenses without the assistance of regular child support payments.

"This is not the life I would choose for myself and my children."

– Connie,* a divorced mother of three struggling to make ends meet in Hastings, Nebraska.



"Politicians and bureaucrats should make more of an effort to learn what poor families go through and experience it for themselves, you know 'walk a mile in their shoes.' You know many [policy makers] have never experienced poverty and yet they are making decisions daily about [low-income] families."

–Vicki Stippel, Director of Families Achieving Independence and Respect.

"There are many barriers with housing, because you end up on a waiting list for months at a time, sometimes for one or two years. Then when you get your Section 8 certificate, you have to find a place that will take it. Then you have to come up with a full month's fair market value rental payment. Even if people get the housing certificate, they can't come up with the money to utilize it. "

–Pam*, low-income parent from Lincoln

Nebraska Summer Food Service Program

The Summer Food Service Program, a federal summer nutrition program for children of needy families (to prevent hunger during the summer so children can return to school ready to learn) has yet to be implemented in many Nebraska counties. Last year, on average 7,294 Nebraska children participated daily in this program in 87 sites. Only 9% of Nebraska counties participated in this program in 1995. The programs can be offered through schools, park departments, and other community organizations.

Child and Adult Care Food Program Through USDA

In 1995 in Nebraska, child care food programs for children in child care centers and day care homes served on average 90,779 meals daily (breakfasts, lunches, suppers and snacks) to preschool age children. With the federal enactment of the Personal Responsibility and Work Opportunity Act of 1996, cuts to the program will include cutting benefits to providers for middle income children's meals in day care homes, as well as elimination of fourth meals served low income children who must spend more than eight hours daily in care.

Housing Cost

The U.S. Department of Housing and Urban Development (HUD) has established an economic standard for estimating whether a household's expenditures for housing represent a "cost burden." A cost burden is defined as spending 35% or more of gross income for housing, including rent or mortgage, utilities, fuels, insurance and taxes.

When Nebraska renter households with children at all income levels are considered, about 30% suffered a cost burden in 1990, paying more than 35% of gross income for housing. Of those who owned their homes, about 10% of families with children were cost-burdened. Low-income families are much more likely to spend more than 35% of gross income for housing.

Juvenile Justice

James, 17, stands in front of the flag that covered his father's casket.

James' Story:

James, age 17, is a Junior Scholastic and National Honor Society member, high school dropout and felon. He has scars on his hands, remains of gang tattoos, burned off by laser treatments. Alcoholic and abusive parents, foster care, and gang life – James has survived them all with a determination to overcome his past. He worked with Success Prep, a job-preparation program for teens and young adults to turn himself around. Success Prep counselors helped him get his GED and secure employment. Shortly after he began working, he was sentenced for a prior felony. He is currently committed to the Youth Rehabilitative Treatment Center in Kearney.

Juvenile Arrests

The juvenile arrest rate (number of arrests per 1,000 juvenile population) increased from 27.5 to 45.5 between 1986 and 1995. The adult arrest rate (number of arrests per 1,000 adult population) increased from 42.0 to 59.9 during the same ten years. The overall number of arrests for juveniles has increased from 11,870 to 20,128, an increase of 69.6% over the ten year period. The overall number of arrests for adults increased from 48,010 to 70,789, an increase of 47.4%. Rates for juveniles have increased more than rates for adults. In 1986 White youth were 74.2% of the total youth arrested. In 1995 they were 81.7% of the total arrested. In 1986 Black youth were 9.4% of the total and in 1995 they were 14.7% of the total youth arrested.

Part I Offenses

Part I Offenses include violent crimes and various property crimes. Between 1986 and 1995 in Nebraska juvenile arrests for violent crimes increased 143.5% (from 154 to 375). Adult arrests from violent crimes increased 47.4% (from 930 to 1,371).

For adults, Part I arrests for crimes against property decreased 0.4% over the ten year period, while arrests for juveniles increased 50.5% (from 4,357 to 6,559). For all Part I Offenses, there was an increase in juvenile arrests of 53.7% (from 4,511 to 6,934).

Part II Offenses

Part II Offenses include a wide range of crimes. In order of frequency, for children the most common are: violations of liquor laws, vandalism, disorderliness, receiving stolen property, curfew violation, violation of drug laws, runaways, and weapons violations. There were 318 juvenile arrests for weapons violations in 1995, compared to 107 in 1986. Between 1986 and 1995 juvenile arrests for Part II offenses increased 79.3% (from 7,358 to 13,194) while adult arrests increased by 55.6% (from 40,189 to 62,550).

Probation

After arrest in 1995, some 10,141 Nebraska youth who had been arrested were put on probation by the courts.

Detention After Arrest

After arrest an officer may release the juvenile to parents or relatives, prepare a written notice requiring the juvenile to appear before the juvenile court of the county, or take the juvenile before the juvenile court or probation officer if there is a need for detention. In 1995, 2,953 Nebraska youth were held in secure youth facilities, not including those detained in Omaha's Z-MOD Center detention facility. Periods of detention range from one day to over a year pending trial or serving a sentence.

Committed to Youth Rehabilitation/ Treatment Centers

The number of male youth who were committed to the Youth Rehabilitation and Treatment Center in Kearney during 1995 was 566. This is an increase of 333 or 142.9% since 1986. The number of female youth committed to the Youth Rehabilitation and Treatment Center in Geneva during 1995 was 92. This is an increase of 54 or 70.3% since 1985. Youth are committed to these correctional facilities for crimes against persons or property by the juvenile court. The average stay at Kearney in 1995 was 4 months; the average stay at Geneva was 5.7 months.

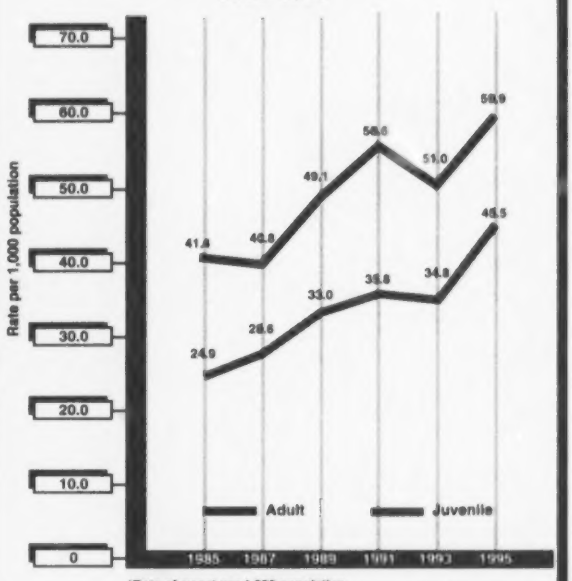
Adult Jail

An additional 99 youth were incarcerated in adult prisons during 1995 for crimes tried in adult court.

Parole in 1995

During the year 354 Nebraska youth were on parole under supervision by the juvenile courts, after having served a period of time committed to the Youth Rehabilitation and Treatment Centers. In June 1995 five youths were on parole after incarceration in adult prisons.

How does the rate* of arrests of juveniles and adults compare? 1985-1995



*Rate of arrest per 1,000 population.
(Rates for juveniles were based on estimated population under 18. Rates for adults were based on estimated population 18 and over.)

How do the arrest numbers of juveniles and adults compare? 1985-1995

Year	Adult	Juvenile
1985	47,689	10,796
1987	46,499	12,344
1989	51,186	14,210
1991	65,529	15,521
1993	59,905	15,264
1995	70,789	20,128

Source: Nebraska Commission on Law Enforcement and Criminal Justice; Population Distribution Branch, U.S. Bureau of Census

"Interestingly, a lot of the kids who I saw as a caseworker doing Child Protective Services I now see as a client in this [probation] system."

– Diane,* a juvenile probation officer

"Money is the big issue. Things are money-driven rather than kid-driven."

– Group home director in western Nebraska who is concerned about a lack of services for troubled youth.

Impact

- Additional research has indicated that focusing on punishment rather than treatment and diversion for the first-time juvenile offender, may stigmatize such offenders and increase incidence of delinquency.*
- National data demonstrate that youth are sent to adult court more often for non-violent crimes than violent crimes and they experience a greater recidivism than those remaining in the juvenile court system.*

Also see Policy page.

Policy

Early Care and Education

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 removes the federal guarantee of child care assistance to families who are current welfare recipients, and to former recipients who previously received one year of transitional assistance.[9]

Health

In 1993, the Nebraska Legislature passed LB 431, which established a child death review team. The purpose of the legislation is noted in the statute as, "there is a need for a comprehensive integrated review of all child deaths in Nebraska and a system for statewide retrospective review of existing records relating to each child death." The first report which reviewed deaths from 1993, was published in October 1996. Key findings from this review were: "A significant proportion of child deaths are preventable. There is currently no uniform system in the state for investigating child deaths. There are substantial variations in death rates, cause of death, information regarding each death, and the preventabilty of child death among counties of differing size."[10]

Child Abuse and Neglect/ Domestic Violence

Because sex offenders present a high risk of repeat offenses, Nebraska legislation was passed in April 1996 to protect communities from these offenders. The Sex Offender Registration Act, LB 645, requires convicted sex offenders whether from Nebraska or other states to register with the local sheriff's department within 5 days of residence within the community, and to inform the department of any address or name change within 5 days of making that change also. A central registry list is kept with the State Patrol office and may be accessed by authorized officials as needed. (Source: LB 645)

Out-of-Home Care

"Every state requires state courts, child welfare agency panels, or citizen review boards to hold periodic reviews to reevaluate the child's circumstances if he/she has been placed in foster care. The purpose of these reviews is to ensure that a child's placement continues to meet his/her needs and to avoid the problem of foster care drift by planning for the child's future and setting deadlines and timetables." [11]

LB 642 was passed in April 1996, amending the Foster Care Review Act. This bill mandated that the State Foster Care Review Board would take sole responsibility for reviewing all cases of children in foster care. The state Foster Care Review Board will be monitored to ensure compliance and quality. (Source: LB642)

Education

In 1994, the Nebraska Unicameral strengthened its position on violence in schools by passing the "Student Discipline Act." This legislation provides that students shall be expelled from school for injuring other students or school representatives by force, as well as for carrying a weapon in school or at a school-sponsored activity. Neb. Rev. Stat. Sec. 79-4,170 - 79-4,205.

Economic Well-Being

On August 22, 1996, President Clinton signed HR 3734, The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, otherwise known as "Welfare Reform." This legislation ends the entitlement to cash assistance for poor children and their families. The Aid for Dependent Children program will be replaced with the Temporary Assistance for Needy Families block grant. Changes include a five year life-time limit on cash assistance, a reduction in food stamp benefits, denying SSI to a number of disabled children, and denying aid to legal immigrants under a number of basic programs. "States will have broad discretion to maintain, broaden or substantially curtail eligibility for basic income assistance for any category of poor families with children." [12]

Juvenile Justice

In April 1994, LB 988, the Juvenile Service Act, was passed. This bill addressed juvenile criminal issues by the establishment of an Office of Juvenile Services within the Department of Correctional Services. This creates a juvenile system unique to and separate from the adult court system. Specific provisions are mandated to address the delicate issues of the juvenile offender. The purpose of this system: to provide a secure facility and therapeutic program to reintegrate youth back into their families, schools, and communities. This act amends previous legislation with language and intent to ensure safety and appropriate rehabilitation for the juvenile. (Source: LB988)

County Data Notes

1 TOTAL COUNTY POPULATION
Source: 1990 U.S. Census of Population, Summary Tape File 3A (STF3A)

2 CHILDREN 17 AND UNDER
Source: 1990 U.S. Census, STF3A

3 CHILDREN UNDER 5
Source: 1990 U.S. Census, STF3A

4 BIRTHS IN 1995
Source: Nebraska Department of Health

5 MINORITY CHILDREN *(Black, Hispanic, Asian, Native American and Children of Other Race)*
Source: 1990 U.S. Census, STFA3A

6 CHILDREN LIVING IN SINGLE PARENT FAMILIES *(Single Head of Household may be female or male)*
Source: 1990 U.S. Census, STF3A

7 PERCENT OF POOR CHILDREN WHO LIVE IN SINGLE PARENT FAMILIES
Source: 1990 U.S. Census, STF3A

8 PERCENT OF POOR CHILDREN WHO LIVE IN TWO PARENT FAMILIES
Source: 1990 U.S. Census, STF3A

9 PERCENT OF CHILDREN LIVING IN POVERTY
Source: 1990 U.S. Census, STF3A

10 PERCENT OF CHILDREN UNDER 5 IN POVERTY
Source: 1990 U.S. Census, STF3A

11 PERCENT OF MINORITY CHILDREN IN POVERTY
Source: 1990 U.S. Census, STF3A

12 PERCENT OF CHILDREN UNDER 6 WHOSE MOTHERS WORK
Source: 1990 U.S. Census, STF3A

13 AVERAGE MONTHLY NUMBER OF FAMILIES ON ADC
Source: Nebraska Department of Social Services

14 AVERAGE MONTHLY NUMBER OF CHILDREN RECEIVING MEDICAID SERVICES
Source: Nebraska Department of Social Services

15 NUMBER OF WOMEN, INFANTS AND CHILDREN ELIGIBLE FOR WIC SERVICES 1995
Source: United States Department of Agriculture

16 NUMBER OF WOMEN, INFANTS AND CHILDREN PARTICIPATING IN WIC SERVICES 1995
Source: Nebraska Department of Health

17 AVERAGE MONTHLY NUMBER OF CHILDREN RECEIVING FOOD STAMPS
Source: Nebraska Department of Social Services

18 AVERAGE DAILY NUMBER OF CHILDREN RECEIVING FREE OR SUBSIDIZED SCHOOL LUNCH
Source: Nebraska Department of Education

19 PERCENT OF ELIGIBLE CHILDREN SERVED BY SUMMER FOOD PROGRAMS 1995
Source: Tufts University Center on Hunger, Poverty and Nutrition Policy

20 BIRTHS TO TEENS 10 TO 17 YEARS FROM 1986 TO 1995
Source: Nebraska Department of Health

21 LOW BIRTH WEIGHT BABIES 1991 TO 1995
Source: Nebraska Department of Health

22 INFANT DEATHS 1986 TO 1995
Source: Nebraska Department of Health

23 DEATHS TO CHILDREN 1 TO 19 1986 TO 1995
Source: Nebraska Department of Health

24 CHILDREN INVOLVED IN DIVORCES 1991 TO 1995
Source: Nebraska Department of Health

25 HIGH SCHOOL GRADUATES 1995
Source: Nebraska Department of Education

26 SEVENTH TO TWELFTH GRADE SCHOOL DROPOUTS 1994-1995
Source: Nebraska Department of Education

27 NUMBER OF CHILDREN WITH VERIFIED DISABILITY RECEIVING SPECIAL EDUCATION
Source: Nebraska Department of Education

28 COST PER PUPIL (PUBLIC EDUCATION EXPENDITURES) 1994-1995
Source: Nebraska Department of Education

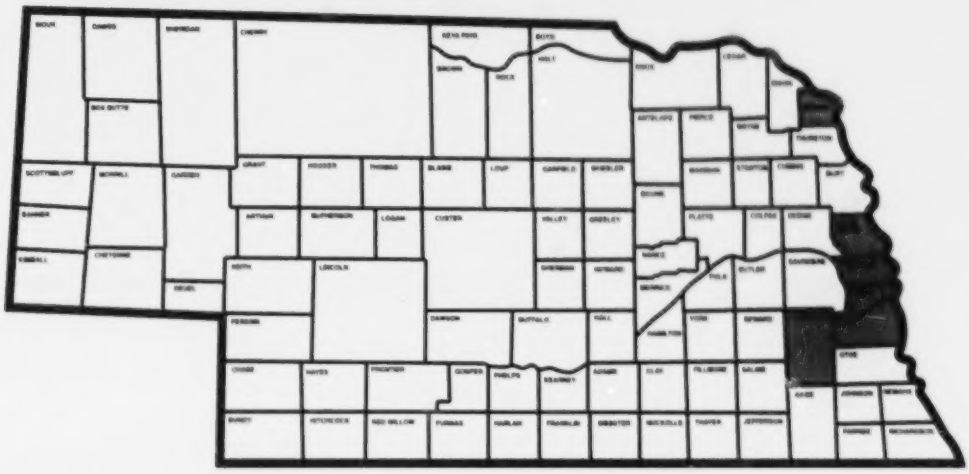
29 HEAD START ENROLLMENT 1995
Source: U.S. Department of Health and Human Services, Region VII Office of Community Operations

30 FOSTER CARE CHILDREN 1995
Source: Nebraska Foster Care Review Board

31 CHILDREN PLACED IN FOSTER HOMES IN THEIR OWN COUNTY 1995
Source: Nebraska Foster Care Review Board

32 JUVENILE ARRESTS 1995
Source: Nebraska Commission on Law Enforcement and Criminal Justice

Nebraska's Metropolitan and Nonmetropolitan Counties



Metropolitan
226,192 children

Nonmetropolitan
228,530 children

BEST COPY AVAILABLE

COUNTY	1 TOTAL POPULATION	2 CHILDREN AGE 0-17	3 CHILDREN UNDER 5	4 1995 BIRTHS	5 MINORITY CHILDREN	6 CHILDREN SINGLE PARENTS	7 % POOR w/ SINGLE PAR.	8 % POOR w/ TWO PARENTS	9 % CHILDREN IN POVERTY	10 % UNDER 5 IN POVERTY	11 % MIN CHIL IN POVERTY	12 % UNDER 6 WORKING MOM	13 FAMILIES ON ADC	14 MEDICAID CHILDREN	15 WIC ELIGIBLE 1995	16 1995 WIC ENROLLED
ADAMS	29625	7393	2118	394	120	1162	59	41	13	15	19	77	285	2150	1011	771
ANTELOPE	7965	2452	656	81	31	234	21	79	23	29	87	58	38	469	503	179
ARTHUR	462	114	36	4	2	0	0	100	19	28	0	33	0	13	33	25
BANNER	852	251	66	8	8	11	18	82	29	36	0	64	9	83	50	8
BLAINE	675	183	41	11	0	0	0	100	39	51	.	63	5	39	32	28
BOONE	6667	1943	534	64	16	107	15	85	16	20	63	70	31	331	393	167
BOX BUTTE	13130	4172	1098	150	413	713	58	42	14	18	46	60	121	1005	523	434
BOYD	2835	765	175	26	7	50	11	89	29	32	71	52	10	117	145	70
BROWN	3657	993	256	38	10	127	21	79	23	33	0	65	16	255	197	128
BUFFALO	37447	9641	2707	565	464	1226	50	50	12	14	25	78	296	2353	1124	906
BURT	7868	2096	518	81	80	234	33	67	21	23	56	66	51	445	378	145
BUTLER	8601	2391	605	97	40	258	39	61	11	15	13	70	29	391	282	84
CASS	21318	6128	1687	322	161	729	35	65	8	13	18	69	197	1393	941	344
CEDAR	10131	3146	844	141	6	134	13	87	14	11	0	73	23	284	445	187
CHASE	4381	1259	329	44	52	163	28	72	14	19	70	53	18	206	248	69
CHERRY	6307	1807	515	81	174	188	20	80	34	47	69	61	28	467	466	209
CHEYENNE	9494	2621	719	119	166	485	54	46	13	21	43	81	72	719	390	135
CLAY	7123	1943	473	83	54	200	40	60	13	13	59	69	49	479	266	106
COLFAX	9139	2542	722	153	112	211	18	82	11	15	7	68	48	365	337	244
CUMING	10117	2844	728	139	34	241	19	81	11	10	0	74	60	543	398	219
CUSTER	12270	3308	841	142	95	338	31	69	17	21	61	73	77	933	456	322
DAKOTA	16742	5046	1414	323	723	859	55	45	15	19	28	73	179	1541	733	692
DAWES	9021	2311	577	114	194	399	57	43	22	36	77	71	128	854	408	300
DAWSON	19940	5546	1385	423	350	670	48	52	13	20	13	70	207	2430	931	1131
DEUEL	2237	602	137	23	73	78	42	58	17	31	62	59	9	76	131	26
DIXON	6143	1727	458	65	14	155	23	77	16	18	29	79	22	266	282	107
DODGE	34500	8992	2376	411	231	1189	51	49	10	14	35	75	259	2104	1202	993
DOUGLAS	416444	112059	33192	6956	23129	25497	78	22	15	20	41	71	6904	31988	14788	11090
DUNDY	2582	658	130	32	10	63	34	66	10	5	10	75	6	78	55	51
FILLMORE	7103	1877	487	90	15	141	23	77	9	9	55	65	26	347	213	144
FRANKLIN	3938	919	258	49	20	73	13	87	14	5	35	62	17	149	138	64
FRONTIER	3101	875	196	27	17	93	16	84	22	22	29	76	10	125	165	49
FURNAS	5553	1350	287	59	45	101	27	73	15	21	53	57	25	307	188	113
GAGE	22794	5537	1520	253	111	855	42	58	17	23	7	81	168	1215	828	364
GARDEN	2460	574	159	20	6	69	38	62	24	22	0	84	11	134	88	61
GARFIELD	2141	553	135	19	2	49	23	77	22	16	0	73	11	120	94	39
GOSPER	1928	476	104	24	0	36	31	69	11	17	.	71	1	33	71	27
GRANT	769	228	64	9	3	32	58	42	16	23	0	64	6	55	41	25
GREELEY	3006	933	209	38	8	102	36	64	15	19	0	79	12	158	132	83
HALL	48925	13960	3851	869	1251	2059	52	48	14	19	36	76	579	4143	1854	1674
HAMILTON	8862	2598	678	137	99	216	19	81	11	11	25	75	38	339	305	176
HARLAN	3810	941	244	44	0	71	26	74	15	19	.	70	18	207	163	40
HAYES	1222	331	91	5	0	9	5	95	23	42	.	54	5	35	69	12

HITCHCOCK	3750	1075	252	26	22	73	18	82	19	16	0	68	16	190	154	81
HOLT	12599	3818	1057	165	23	298	16	84	17	22	0	65	54	844	665	416
HOOKER	793	198	49	12	4	24	65	35	13	8	0	78	2	0	23	25
HOWARD	6055	1709	431	79	36	144	29	71	16	20	12	71	22	0	247	138
JEFFERSON	8759	2146	567	85	51	162	42	58	10	8	41	73	53	0	273	126
JOHNSON	4673	1140	267	42	41	142	36	64	15	15	20	79	17	169	139	45
KEARNEY	6629	1774	506	81	20	216	30	70	14	21	32	69	14	251	293	87
KEITH	8584	2386	611	97	242	337	31	69	12	13	34	75	35	486	360	198
KEY APAHA	1029	270	50	17	0	21	18	82	35	34	.	45	4	53	47	32
KIMBALL	4108	1125	283	42	113	195	50	50	14	12	23	57	18	173	157	62
KNOX	9534	2498	607	116	209	232	20	80	26	27	60	74	61	537	395	254
LANCASTER	213641	50912	15112	3166	3957	8605	62	38	10	14	36	75	1880	11796	5420	4787
LINCOLN	32508	9353	2383	433	821	1626	59	41	16	23	47	58	378	2628	1221	948
LOGAN	878	292	71	7	4	15	21	79	18	20	0	64	3	20	47	11
LOUP	683	188	49	1	2	10	17	83	13	0	100	57	1	21	35	11
MCPHERSON	546	161	40	6	0	9	10	90	58	43	.	74	0	7	30	10
MADISON	32655	9389	2663	528	445	1269	54	46	10	10	23	78	245	2149	1090	910
MERRICK	8042	2263	576	115	34	199	37	63	14	18	0	65	32	304	398	221
MORRILL	5423	151[illegible]	394	70	176	126	21	79	20	26	48	54	44	437	244	108
NANCE	4275	122[illegible]	335	44	39	76	19	81	16	22	26	77	22	226	204	104
NEMAHA	7980	1950	511	86	28	182	36	64	12	18	56	54	66	420	264	99
NUCKOLLS	5786	1509	343	63	9	135	20	80	18	26	22	71	27	222	212	93
OTOE	14252	3681	951	170	101	349	26	74	14	19	42	72	87	676	483	208
PAWNEE	3317	778	213	22	22	108	19	81	16	17	0	66	11	135	157	53
PERKINS	3367	1000	226	32	17	74	17	83	21	15	24	61	7	121	96	42
PHELPS	9715	2619	705	122	109	361	42	58	12	21	33	86	39	452	347	166
PIERCE	7827	2297	619	93	49	204	32	68	12	14	20	68	31	358	338	115
PLATTE	29820	9277	2579	468	228	875	37	63	11	12	10	75	184	1582	1191	565
POLK	5675	1541	344	60	8	119	14	86	11	9	43	75	18	200	131	65
RED WILLOW	11705	3136	838	152	113	492	43	57	16	20	11	72	69	758	493	279
RICHARDSON	9937	2539	695	102	54	232	43	57	13	19	6	66	69	676	431	213
ROCK	2019	588	144	19	0	99	35	65	23	35	.	52	8	79	110	55
SALINE	12715	3135	827	133	65	297	35	65	12	13	37	80	49	478	290	213
SARPY	102583	32992	9536	1982	3991	3728	51	49	6	7	9	67	398	2691	3341	1531
SAUNDERS	18285	5186	1365	226	87	463	28	72	12	14	10	71	76	783	765	254
SCOTTS BLUFF	36025	10110	2561	462	2682	2095	50	50	22	32	43	63	752	4338	1879	1063
SEWARD	15450	4073	1069	178	92	416	45	55	12	14	42	75	55	609	453	184
SHERIDAN	6750	1897	405	97	253	288	35	65	26	33	58	58	81	607	335	213
SHERMAN	3718	1052	242	37	12	88	15	85	20	19	50	70	10	124	193	117
SIOUX	1549	409	100	12	24	43	21	79	26	26	43	65	2	14	96	3
STANTON	6244	2077	572	80	19	191	32	68	16	22	53	58	15	274	356	93
THAYER	6635	1647	382	54	54	180	29	71	17	27	50	79	25	358	303	84
THOMAS	851	266	52	5	16	58	28	72	28	38	50	73	5	51	38	13
THURSTON	6936	2428	757	136	1464	686	64	36	42	49	61	65	291	1206	664	610
VALLEY	5169	1290	322	37	5	117	48	52	13	23	0	75	25	327	251	143
WASHINGTON	16607	4613	1063	192	73	436	33	67	5	9	40	72	56	497	453	227
WAYNE	9364	2248	642	112	39	227	27	73	15	17	20	70	43	344	326	134
WEBSTER	4279	1012	263	42	19	80	26	74	15	17	32	70	11	171	140	62
WHEELER	948	311	89	11	2	12	2	98	18	29	0	43	3	29	55	18
YORK	14428	4013	1143	171	83	344	24	76	7	11	27	67	57	730	431	281
STATE TOTAL	1578385	429187	175353	23321	44303	66385	53	48	14	17	37	71	15535	96504	57561	35059

COUNTY	17 FOOD STAMP CHILDREN	18 FREE/SUBSID. SCHOOLLUNCH	19 SUMMER FOOD PROGRAM %	20 TEEN BIRTHS 10-17, '86-'95	21 LOW BIRTH WT. '91-'95	22 INFANT DEATHS '86-'95	23 1-19 DEATHS '86-'95	24 CHILDREN OF DIVORCE '91-'95	25 GRADUATES '94-'95	26 DROPOUTS '94-'95	27 SPECIAL ED. '94-'95	28 COST PER PUPIL '94-'95	29 HEAD START 1995	30 FOSTER CARE 1995	31 % FOSTER CARE OWN COUNTY	32 JUVENILE ARRESTS
ADAMS	827	1338	9	115	119	32	39	564	369	68	740	4579	105	80	31	230
ANTELOPE	204	604	0	0	13	5	14	120	119	2	126	4703	20	7	43	4
ARTHUR	4	0	0	11	1	0	1	5	13	0	6	7504	0	0	.	0
BANNER	0	69	0	3	1	1	2	6	14	0	13	6855	0	4	0	0
BLAINE	4	56	0	2	1	0	1	14	13	0	9	7439	0	1	0	0
BOONE	154	544	0	13	16	7	5	98	85	1	153	5319	0	1	0	0
BOX BUTTE	547	709	14	95	56	15	23	357	246	15	318	3786	20	29	38	296
BOYD	32	232	0	13	3	2	4	41	50	4	87	4818	50	3	0	32
BROWN	87	167	0	18	13	2	5	91	41	4	77	4672	0	8	25	11
BUFFALO	1059	1883	53	152	158	42	33	912	551	88	1019	4280	16	68	41	484
BURT	229	530	0	20	22	6	11	169	105	15	250	4392	81	10	30	53
BUTLER	144	493	0	29	20	9	11	123	130	10	219	5284	20	21	29	49
CASS	737	1001	0	92	93	31	30	530	242	28	532	4553	18	28	36	174
CEDAR	153	973	0	17	30	13	17	121	163	7	219	4670	103	11	0	68
CHASE	92	370	0	23	10	4	5	48	86	4	164	5682	20	5	0	18
CHERRY	185	404	0	30	27	3	8	136	59	12	115	4809	38	11	45	9
CHEYENNE	412	605	39	46	46	9	10	256	142	14	279	5248	35	19	53	111
CLAY	220	436	0	17	19	9	14	89	113	15	314	6291	20	23	4	2
COLFAX	160	651	0	30	39	11	13	219	139	23	254	4291	20	13	15	126
CUMING	159	761	0	22	33	8	20	141	146	8	278	4769	17	10	50	46
CUSTER	369	770	0	41	39	9	16	270	186	5	225	4941	18	17	47	22
DAKOTA	572	1180	87	141	79	35	18	421	183	39	458	3771	60	54	59	257
DAWES	424	491	0	34	42	13	5	170	198	112	280	4631	60	11	27	72
DAWSON	755	1792	7	156	139	32	27	647	287	82	615	4295	69	92	41	341
DEUEL	3	149	0	8	5	3	0	38	22	2	54	6484	14	2	0	8
DIXON	78	219	0	25	21	8	9	117	56	10	88	4663	0	8	50	53
DODGE	873	2061	0	138	103	42	44	832	463	73	990	4537	125	153	42	372
DOUGLAS	22018	26077	18	2937	2356	631	493	9386	4873	1788	10356	4629	904	1607	70	5502
DUNDY	29	142	0	5	13	1	5	38	32	0	56	5027	0	3	67	6
FILLMORE	126	422	0	17	26	6	8	153	83	4	189	5584	18	33	12	20
FRANKLIN	70	191	0	18	15	1	7	29	43	4	87	6372	0	8	13	10
FRONTIER	34	291	0	6	6	2	0	48	47	1	120	6673	0	1	100	10
FURNAS	99	461	0	18	8	3	4	82	95	3	157	5547	0	1	0	44
GAGE	513	912	0	113	80	27	31	562	207	39	513	4641	58	36	31	260
GARDEN	4	174	0	8	4	1	1	53	32	1	39	6982	15	5	40	12
GARFIELD	46	133	0	6	7	5	5	60	27	2	61	5198	17	6	67	0
GOSPER	0	78	0	4	10	1	0	42	21	2	38	5979	0	4	0	27
GRANT	15	51	0	0	3	0	2	9	12	1	18	6953	0	0	.	0
GREELEY	68	470	0	10	9	1	8	22	70	3	98	5612	18	3	0	4
HALL	1981	3177	0	340	253	58	58	1388	695	182	1371	4251	153	155	52	1499
HAMILTON	128	404	0	34	34	7	11	200	102	10	210	5247	20	22	18	46
HARLAN	68	102	0	8	9	1	3	59	25	1	48	5789	0	8	0	16
HAYES	10	67	0	3	2	0	1	2	13	0	16	7089	0	0	.	8

HITCHCOCK	53	215	0	16	6	4	3	39	39	0	91	5940	0	2	0	4
HOLT	321	752	0	43	22	10	22	287	217	9	254	4557	47	28	18	72
HOOKER	27	102	0	1	2	0	0	17	18	20	25	5200	0	0	.	0
HOWARD	121	584	0	28	26	9	11	101	104	0	238	.	20	8	13	25
JEFFERSON	.	533	0	22	28	14	8	197	150	0	276	.	20	5	60	.
JOHNSON	55	305	0	13	14	8	5	90	65	9	167	4869	0	6	17	7
KEARNEY	77	222	0	9	36	10	17	158	103	3	193	5187	35	12	0	17
KEITH	219	554	0	54	22	7	5	203	125	20	244	4787	18	51	12	72
KEY APAHA	13	0	0	1	3	1	1	30	18	3	10	5775	0	0	.	4
KIMBALL	14	281	0	15	12	3	4	106	40	7	70	5554	17	26	31	32
KNOX	277	1079	5	39	24	11	13	131	160	14	286	5354	20	11	27	70
LANCASTER	6342	9590	4	848	878	270	198	4984	2263	621	4942	4974	329	381	64	3875
LINCOLN	1298	1783	18	188	148	41	41	948	436	84	980	4502	36	116	52	764
LOGAN	1	86	0	2	2	0	3	8	14	1	29	6016	0	0	.	0
LOUP	0	56	0	1	0	0	1	6	11	0	21	5679	0	0	.	0
MCPHERSON	0	0	0	2	0	0	1	2	5	0	10	3949	0	2	0	0
MADISON	842	1692	0	139	158	51	50	845	494	47	768	6253	50	90	42	489
MERRICK	129	557	0	31	29	4	15	151	145	11	235	5068	20	6	33	21
MORRILL	227	553	37	30	15	6	14	128	72	5	99	4911	26	7	43	20
NANCE	119	357	41	14	12	5	4	84	71	7	116	4417	17	2	0	9
NEMAHA	200	416	0	20	19	10	13	219	92	3	144	4884	20	8	25	10
NUCKOLLS	133	315	0	15	23	2	10	95	80	3	175	5577	34	14	21	16
OTOE	334	573	0	81	59	9	15	373	200	49	407	4410	20	10	30	103
PAWNEE	45	258	0	7	8	6	5	52	48	2	112	5171	34	4	50	2
PERKINS	44	180	0	4	6	1	6	56	47	6	75	6102	0	2	0	13
PHELPS	187	385	0	34	35	8	13	190	128	9	384	5172	0	13	54	76
PIERCE	122	488	0	22	19	12	13	170	109	6	168	4279	15	10	20	20
PLATTE	742	1346	0	114	97	36	39	741	454	73	761	4420	57	39	21	460
POLK	63	269	0	19	21	5	12	90	89	4	143	5912	10	3	0	5
RED WILLOW	511	774	0	41	35	16	19	253	160	28	383	4885	18	13	31	146
RICHARDSON	344	793	0	41	40	6	13	247	132	16	230	4974	62	35	40	73
ROCK	45	122	0	4	5	1	3	23	36	1	56	5112	0	4	0	7
SALINE	182	682	0	25	38	8	14	340	172	12	325	4515	20	17	41	225
SARPY	729	3749	0	349	501	134	118	2891	1274	138	2189	4375	91	296	34	1666
SAUNDERS	327	856	0	50	62	16	20	455	211	19	450	4682	44	27	26	94
SCOTTS BLUFF	2749	2777	8	347	180	54	45	996	447	125	863	4135	227	96	54	493
SEWARD	225	735	0	23	37	8	20	279	211	23	434	4913	20	27	26	82
SHERIDAN	350	567	0	32	32	13	17	135	99	7	174	4178	40	10	20	193
SHERMAN	75	301	0	22	13	3	6	60	39	11	103	5327	20	6	17	23
SIOUX	1	0	0	2	6	2	6	2	8	0	17	7232	0	2	0	1
STANTON	97	142	0	26	18	2	6	131	29	5	56	4296	20	15	33	86
THAYER	139	357	0	6	14	2	9	127	94	0	144	6163	20	10	40	5
THOMAS	17	51	0	1	0	0	0	27	11	1	16	7599	0	0	.	5
THURSTON	738	1252	29	123	25	24	14	132	124	48	460	5414	20	4	50	3
VALLEY	142	301	0	14	13	5	8	106	74	7	96	5522	20	5	0	13
WASHINGTON	185	564	0	29	52	9	14	315	228	31	421	4307	0	9	22	106
WAYNE	142	386	0	17	32	8	8	143	123	7	164	4267	20	2	0	21
WEBSTER	86	220	0	13	8	1	5	56	61	0	114	5111	15	3	66	6
WHEELER	9	69	0	1	5	1	0	15	20	0	12	6552	0	1	0	0
YORK	262	624	0	30	61	16	13	409	204	16	390	5491	30	30	23	291
STATE TOTAL	-	-	-	7826	6884	1968	1922	36311	20178	4199	39926	5167	3680	10249	52	20128

Methodology, Data Sources and Definitions

GENERAL

Data Sources: Sources for all data are listed below by topic.In general, data were obtained from the state agency with primary responsibility, and from reports of the U.S. Bureau of the Census, U.S. Department of Commerce. With respect to census data, the report utilizes data from the 1980 and 1990 U.S. Census of Population.

Metropolitan Counties - Cass, Dakota, Douglas, Lancaster, Sarpy, and Washington. (Based on U.S. Bureau of the Census definitions.)

Nonmetropolitan Counties - All other Nebraska counties. (Based on U.S. Bureau of the Census definitions.)

Race - Race/Hispanic identification - Throughout this report, race is reported based on definitions used by the U.S. Bureau of the Census. The census requests adult household members to specify the race for each household member including children. The racial categories provided are: White, Black/Negro, American Indian/Eskimo/ Aleut, Asian/Pacific Islander, and Other Race. These racial categories are mutually exclusive; all persons are expected to respond with a single category. The Census treats Hispanic origin as a separate category and Hispanics may be of any race. In Nebraska the great majority of Hispanic householders classify themselves as of either White or Other Race.

Rate - Where appropriate, rates are reported for various indicators. A rate is the measure of the likelihood of an event/case found in each 1,000 or 100,000 "eligible" persons. (Child poverty rates reflect the number of children living below the poverty line as a percentage of the total child population.)

Selected Indicators for 1996 Report - The indicators of child well-being selected for presentation in this report reflect the availability of state data, the opinion and expertise of the Kids Count in Nebraska project consultants and advisors, and the national Kids Count indicators.

INDICATORS OF CHILD WELL-BEING

Early Care and Education

Data Sources: Parents in the workforce data were taken from the U.S. Census of Population, 1990. Data concerning child care were provided by the Nebraska Department of Social Services. Data concerning Head Start were provided by the Administration for Children and Families, U.S. Department of Health and Human Services, Office of Family Supportive Services, Head Start and Youth Branch.

Child care subsidy - The Nebraska Department of Social Services provides full and partial child care subsidies utilizing federal and state dollars. Eligible families include those on Aid to Families with Dependent Children and families at or below 110% of poverty. Most subsidies are paid directly to a child care provider, while some are provided to families as vouchers.

Licensed child care - State statute requires the Nebraska Department of Social Services to license all child care providers who care for four or more children from more than one family on a regular basis, for compensation. A license may be provisional, probationary or operating. A provisional license is issued to all applicants for the first year of operation.

Center based care - Day care centers which provide care to many children from a number of families. State license is required.

Family Child Care Home I - Provider of child care in a home to between 4 and 8 children from families other than provider's at any one time. State license is required. The licensure procedure begins with a self-certification process. Can be approved or licensed.

Family Child Care Home II - Provider of child care serving 12 or fewer children at any one time. State license is required.

Head Start - The Head State program includes health, nutrition, social services, parent involvement, and transportation services. This report focuses on the largest set of services provided by Head Start - early childhood education.

Health: Physical and Behavioral

Data Sources: Data for Medicaid participants were provided by the Nebraska Department of Social Services. Data related to births, deaths, pertussis, immunizations, and blood lead levels were provided by the Nebraska Department of Health and/or based on the DOH 1995 Vital Statistics Report. Data related to children's use of alcohol, tobacco, and drugs are taken from the 1995 Youth Risk Behavior Survey. Data on health insurance are from the U.S. General Accounting Office. Data enumerating motor vehicle accident related injuries were provided by the Nebraska Department of Roads.

Data pertaining to children receiving mental health and substance abuse treatment in public community and residential treatment facilities were provided by the Nebraska Department of Institutions.

Prenatal Care - Data on prenatal care are reported by the mother on birth certificates.

Low Birth Weight - A child weighing less than 2,500 grams or approximately 5.5 pounds at birth.

Child Abuse and Neglect/ Domestic Violence

Data Sources: Data were provided by Foster Care Review Board, the Nebraska Department of Social Services, and the Nebraska Domestic Violence Sexual Assault Coalition.

Neglect - Can include emotional, medical, or physical neglect, or a failure to thrive.

Substantiated Case - A case has been reviewed and an official office or court has determined that credible evidence of child abuse and or neglect exists. Cases are reviewed by the Nebraska Department of Social Services and/or an appropriate court of law.

Agency substantiated case - The Nebraska Department of Social Services determines a case to be substantiated when NDSS finds indication, by a "preponderance of the evidence," that abuse and/or neglect occurred. This evidence standard means that the event is more likely to have occurred than not occurred.

Court substantiated case - A court of competent jurisdiction finds, through an adjudicatory hearing, that child maltreatment occurred. The order of the court must be included in the case record.

Domestic Violence Shelter - Shelters (public or private) for women and children whose health/ safety are threatened by domestic violence.

Out of Home Care

Data Sources: Data were provided by the Nebraska Department of Social Services and the Foster Care Review Board.

Approved foster care homes - The Nebraska Department of Social Services approves homes for one or more children from a single family. Approved homes are not reviewed for licensure. Data on approved homes has been maintained by the Nebraska Department of Social Services since 1992.

Licensed foster care homes - Must meet the requirements of the Nebraska Department of Social Services. Licenses are reviewed for renewal every two years.

Out-of-home care - 24 hour substitute care for children and youth. Out-of-home care is temporary care until the child/youth can be returned to his/her family, placed in an adoptive home, receive a legal guardian or reach the age of majority. Out-of-home care includes the care provided by relatives, foster homes, group homes, institutional settings and independent living.

Education

Data Sources: Data on high school completion, high school graduates, secondary school drop-outs, expulsions, and children with verified disabilities were provided by the Nebraska Department of Education.

Behavioral Disorder - An inability to learn which cannot be explained by intellectual, sensory or health factors; an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; inappropriate types of behavior or feelings under normal circumstances; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes children with schizophrenia. The term does not include children with social maladjustments unless determined to have behavioral disorders.

Dropouts - A dropout is an individual who: A) was enrolled in school at some time during the previous school year, B) was not enrolled at the beginning of the current school year, C) has not graduated from high school or completed a state or district-approved educational program, or D) does not meet any of the following exclusionary conditions; 1) transfer to another public school district, private school, or state or district-approved education program, 2) temporary absence due to suspension or school-approved illness, or 3) death.

High school completions - The high school completion rate is a comparison of the number of children starting high school and the number graduating four years later. This comparison does not account for transfers in and out, deaths, or temporary absences.

Short term suspension - A principal may deny any student the right to attend school or to take part in any school function for a period of up to five school days on the following grounds: A) conduct constituting grounds for expulsion as set out in the Student Discipline Act, or B) any other violation of rules and standards of behavior adopted under the Student Discipline Act.

Long term suspension - The exclusion of a student from attendance in all schools within the system for a period exceeding five school days but less than twenty school days. Grounds for long-term suspension, expulsion or mandatory reassignment include but are not limited to use of violence, damage to property, personal injury to a school employee or a student, threatening a student, possessing, handling or transmitting any object or material that is ordinarily considered a weapon, possession, selling, dispensing or use of a controlled substance, engaging in any other activity forbidden by the laws of Nebraska or, repeated violation of any rules and standards.

Expulsion - Exclusion from attendance in all schools within the system in accordance with section 79-4, 196. Expulsion is generally for one semester unless the misconduct involved a weapon or intentional personal injury, for which it may be for two semesters.

Mandatory reassignment - The involuntary transfer of a student to another school in connection with any disciplinary action.

Special Education - Specially designed instruction, including classroom, home instruction and instruction in hospitals and institutions, at no additional cost to the parent to meet the unique needs of a child with a verified disability. The term includes speech pathology, occupational therapy, physical therapy, etc.

Economic Well Being

Data Sources: Data related to Aid to Dependent Children, recipients of food stamps, and child support collections were provided by the Nebraska Department of Social Services. Data concerning divorce and involved children were taken from Vital Statistics provided by the Nebraska Department of Health. Data concerning the WIC program were provided by the Nebraska Department of Health. Data enumerating the number of children in low income families and cost burden for housing were taken from the 1990 U.S. Census of Population, STF3A. Data concerning numbers of children in school lunch, school breakfast and child care food programs were provided by the Nebraska Department of Education. Data on the Summer Food Service Program were provided by Tufts University. Data on the EIC program were provided by the Center on Budget and Policy Priorities.

Juvenile Justice

Data Sources: Data concerning total arrests were provided by the Nebraska Commission on Law Enforcement and Criminal Justice, for all persons (juveniles under age 19). Data concerning the number of juveniles in detention centers were provided by the Nebraska Department of Correctional Services, Office on Juvenile Services.

Arrest, Part I Offenses - There are two categories of serious crimes: violent crimes and crimes against property. Violent crimes include the following: murder/manslaughter, death by negligence, forcible rape, robbery, felony assault. Crimes against property include: burglary, larceny-theft, motor vehicle theft and arson.

Arrest, Part II Offenses - The following crimes are included: misdemeanor assault, forgery and counterfeiting, fraud, embezzlement, stolen property, vandalism, weapons offenses, prostitution and commercialized vice, sex offenses, drug offenses, gambling, offenses against family, driving under the influence, liquor offenses, disorderly conduct, vagrancy, curfew and loitering law violations and runaways.

Juvenile Detention - Juvenile detention is the temporary and safe custody of juveniles who are accused of conduct subject to the jurisdiction of the Court, requiring a restricted environment for their own or the community's protection, while pending legal action.

Youth Rehabilitation and Treatment Center (YRTC) -
A long term staff-secure facility designed to provide a safe and secure environment for court adjudicated delinquent youth. A YRTC is designed to provide services and programming that will aid in the development of each youth with a goal of successfully reintegrating the youth back into the community.

References

1 Gomby, D.S.; Larner, M.B.; Stevenson, C.S.; Lewit, E. M., and Behrman, R.E., "Longer-Term Outcomes of Early Childhood Programs: Analysis and Recommendations," *The Future of Children* (1995) Vol. 5, No. 3. pp. 6-25.

2 Fronstin, "Children Without Health Insurance: An Analysis of the Increase of Uninsured Children Between 1992 and 1993," *Inquiry* 32:353-359 (1995), pp. 353-359.

3 Office of Juvenile Justice and Delinquency Prevention, "Urban Delinquency and Substance Abuse," 1993 in "Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders." Office of Juvenile Justice and Delinquency Prevention, December 1993, pp. 6-15.

4 Brodzinsky, D., "Long-term Outcomes in Adoption," *The Future of Children,* (1993), Vol. 3, No. 1, p. 153.

5 Catterall, J.S., "On the Social Costs of Dropping Out," *High School Journal 71* (1987): 19-29 in *Just the Facts: A Summary of Recent Information on America 's Children and Their Families,* National Commission on Children (1993) p 107.

6 Children's Defense Fund, Sherman, A., "Wasting America's Future," (1994) p. 61.

7 Fritsch, E. and Hernmens, C., "Juvenile Waiver in the United States 1979-1995: A comparison and analysis of state waiver statutes," *Juvenile and Family Court Journal,* 46(3) (1995) p. 17-35.

8 National Center on Institutions and Alternatives, Lotke, E. and Schiraldi, V., "An Analysis of Juvenile Homicides: Where they Occur and the Effectiveness of Adult Court Intervention," (1996) p. 10.

9 Center for Law and Social Policy, "A Summary of Key Child Care Provisions of H.R. 3734," (1996).

10 Child Death Review Team, Nebraska Child Death Review Report for 1993, (1996) Sec. 71-3404 Neb. Rev. Stat.

11 National Center of Child Abuse and Neglect, U.S. Department of Health and Human Services, Administration for Children and Families, "Working with the Courts in Child Protection," (1992) p. 18.

12 Center on Budget and Policy Priorities, Super, D.; Parrott, S.; Steinmentz, S.; Mann, C., "The New Welfare Law," (1996).

Nikki, age 17, with her children, Quaetrey, 3, and Anjoli, 2 months.

Nikki learned positive parenting techniques through Mama & Me. On being a teen parent, she says, "I wouldn't recommend it."

–Nikki, teen mom

Kids Count Team Members and Advisors

Kids Count Team Members

Voices for Children in Nebraska

Kathy Bigsby Moore, Project Director, ***Executive Director***
Kristin J. Morrissey, Assistant to the Project ***Director of Policy***
Cara Anderson Bentz, Ph.D., ***Research Coordinator***
Sally Swanger, ***Administrative Assistant***
Kristan Boyd, ***Graduate Research Assistant***
Louise Jacobs, ***Graduate Research Assistant***

Research Evaluation

John Comer, Ph.D., Dept. of Political Science
Univ. of NE - Lincoln, Evaluation

Panel of Advisors

Lt. Gov. Kim Robak, Chair
Carol Bloch, State Public Affairs Chair,
National Council of Jewish Women
Jim Bowman, M. Div., Director,
Lutheran Advocacy Office
Bruce Buehler, M.D., Chair,
Dept. of Pediatrics, Univ. of NE
Medical Center
William Caldwell, Ed.D., Extension Specialist,
Volunteer Development Univ. NE -Lincoln
Douglas C. Christensen, Ph.D., Commissioner of
Ed., NE Dept. of Education
Harold Clarke, Director,
NE Dept. of Correctional Services
Bonnie Coffey, Executive Director, Womens
Commission
Allen Curtis, Executive Director,
NE Commission on Law Enforcement and
Criminal Justice
George Dillard, President & CEO,
Urban League of NE
Dan Dolan, Commissioner, NE Dept. of Labor
Dawson Dowty, President, Lincoln Foundation
Joel Gajardo, Ph.D., Executive Director,
Hispanic Community Center, Lincoln
Jon Hill, M.S.W., Dir., Office of Juvenile Services
NE Dept. of Correctional Services
Mark B. Horton, M.D., M.S.P.H., Director,
NE Dept. of Health
Cecilia Huerta, Executive Director,
Mexican American Commission
Carol Keller, Public Affairs Chair,
Junior League of Omaha
Derald Kohles, Highway Safety,
NE Dept. of Roads
Ardi Korver, Executive Director,
Consortium for Planning & Advocacy
Norman Krivosha, Exec. Vice Pres. & Corporate
Gen. Counsel, Ameritas Life
Insurance Corp.
Charles Lamphear, Ph.D., Director, Bureau of
Business Research, University of
Nebraska-Lincoln
Jean Lovell, J.D., Director, Governor's Policy
Research and Energy Office
Don Leuenberger, Director,
NE Dept. of Social Services
Steve Martin, Vice President, Health Services
Research and Reimbursement
Blue Cross/Blue Shield
Denis McCarville, M.S.W., President,
NE Association. of Homes & Services for
Children, Uta Halee Girls Village
Stu Miller, Deputy Director,
NE Dept. of Economic Development
Tom Moloney, Research Manager,
NE Dept. of Labor
Judi Morgan, Executive Director,
NE Commission on Indian Affairs
Pam Morris-Stump, Deputy Director,
Central NE Community Services
Maxine B. Moul, Director,
NE Dept. of Economic Development
Keith Mueller, Ph.D., Director, Nebraska Center
for Rural Health Research, UNMC
Reaves Nahwooks, Ph.D., Chair,
NE Commission on Indian Affairs
Andrea Nelson, M.Ed., President,
League of Women Voters of NE
Kathy O'Connor, M.S., Executive Director,
Alliance of Family Shelters
Sarah O'Shea, Executive Director,
NE Domestic Violence/
Sexual Assault Coalition
Robert Patterson, M.S.W., Director,
Charles Drew Health Center
Jim Pearson, Special Assistant to Director,
NE Dept. of Roads
Jessie K. Rasmussen, Deputy Director,
NE Dept. of Social Services
L. Lynn Rex, Executive Director,
League of Municipalities
Rob Robinson, Manager, Planning
Omaha Housing Authority
Senator DiAnna R. Schimek
Jennifer Severin Clark, Executive Director,
NE Arts Council
Michael Steinman, Ph.D., Chair, Governor's
Commission for the Protection of Children
Carolyn Stitt, M.S.W., Director,
Foster Care Review Board
Jim Sullivan, Sr. Vice President,
United Way of the Midlands, Omaha
Earl Taylor, Executive Director,
Omaha Community Foundation
Senator Don Wesely
Brian Wilcox, Ph.D., Director, Center on
Children, Family & Law,
Univ. of NE - Lincoln
James Wiley, Deputy Director, NE Department
of Public Institutions

Technical Team

Jerry Bahr, Administrator, Research & Finance
Division, NE Dept. of Social Services
Robert Beecham, Administrator, Data Center,
NE Dept. of Education
Grey Borden, Immunizations,
NE Department of Health
Angella Bowman, M.A., UNMC
Martha Carter, Research Analyst,
Legislative Research Office
Stanley Cooper, Ph.D., Administrator, Health
Records Management, NE Dept. of Health
Linda Tuxhorn Cox, MIS Coordinator,
Foster Care Review Board
Ann Coyne, Ph.D., School of Social Work,
Univ. of NE - Omaha
Jerome Deichert, M.A., Center for Public Affairs
Research, Univ. of NE - Omaha
Harriet Egertson, Ph.D., Early Childhood
Administrator, Office of Early Childhood
Care & Education, NE Dept. of Education
Paula Eurek, R.D. Administrator, Family Health,
Nebraska Department of Health
Murray Frost, Ph.D., Director of Research &
Gov't Relations,
United Way of the Midlands, Omaha
Bob Grant, Data, NE Dept. of Roads
Chris Hanus, Administrator, Human Services
Division NE Dept. of Social Services
Paula Hartig, Data Utilization Program
Manager, NE Dept. of Public Institutions
Elizabeth Hruska, Budget Analyst, Legislative
Fiscal Office
Frank Jenson, Dept. of Probation Administration
Richard Kelly, M.B.A., Administrator, Planning
and Data Analysis Support, NE Dept. of
Health
Steve King, Planning, NE Dept. of Corrections
Michael Lundeen, MS, Program Analyst,
NE Dept. of Economic Development
Charlotte Marthaler, Grants Consultant,
NE Dept. of Health
Mark D. Martin, Office of Juvenile Services,
NE Dept. of Corrections
Mark Miller, Health Data Coordinator, Data
Collection, NE Dept. of Health
Tom Moloney, Research Manager,
NE Dept. of Labor
Keith Mueller, Ph.D., Director, Nebraska Center
for Rural Health Research, UNMC
Ian Newman, Ph.D., Director, NE Prevention
Center for Alcohol & Drug Abuse,
Professor of Health Education,
Univ. of NE - Lincoln
Michael Overton, M.S., Director, Statistical
Analysis Center, NE Commission on
Law Enforcement & Criminal Justice
Magda Peck, Sc.D., Dept. of Pediatrics,
Univ. of NE Medical Center
Sam Prieb, Highway Safety, NE Dept. of Roads
Mike Reddish, NE Dept. of Correctional Services
Deb Scholten, M.A. Winnebago Healthy Start
Coordinator, Sioux City, IA
David Schor, M.D., M.P.H., Medical Advisor,
NE Dept. of Health
Joe Steele, State Court Administrator,
NE Supreme Court
Larry A. Tewes, Assistant Director,
NE Dept. of Correctional Services
Patricia Wilson, Ph.D., Office of Community
Mental Health, NE Dept. of Public
Institutions

Monica, age 5*

Voices For Children NEBRASKA

7521 Main Street
Suite 103
Omaha, NE 68127
(402) 597-3100
Fax: (402) 597-2705

215 Centennial Mall, Suite 426
Lincoln, NE 68508
(402) 474-2690

BEST COPY AVAILABLE